

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Stop Hillary PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="25872.09"/>	<input type="text" value="25872.09"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25872.09"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="798141.76"/>	<input type="text" value="798141.76"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="824013.85"/>	<input type="text" value="824013.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="610355.84"/>	<input type="text" value="610355.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="213658.01"/>	<input type="text" value="213658.01"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Stop Hillary PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20555.00	20555.00
(ii) Unitemized	94318.84	94318.84
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	114873.84	114873.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	114873.84	114873.84
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	683267.92	683267.92
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	798141.76	798141.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	798141.76	798141.76

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	96263.45	96263.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	96263.45	96263.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	46650.00	46650.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	6345.00	6345.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	6345.00	6345.00
29. Other Disbursements	461097.39	461097.39
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	610355.84	610355.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	610355.84	610355.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	114873.84	114873.84
34. Total Contribution Refunds (from Line 28(d))	6345.00	6345.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	108528.84	108528.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	96263.45	96263.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	96263.45	96263.45

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC `5 `F9DCFH`G7 <98I @ `CF `H9A-N5 HCB

Form/Schedule: F3XA
Transaction ID :

This report amended to properly list two refunds of individual contributions on line 28(a), and one Carey account expenditure on line 29. Please note that this Committee has previously, and properly, reported independent expenditures publicly distributed in June but that do not have corresponding reportable expenditures until July. These independent expenditures will therefore appear on the Committee's 2015 Year End Report of Receipts and Expenditures. For more information, see the Form 99 filed together with this amendment.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. YVONNE BERRY
 Mailing Address 1019 VAN SICLEN AVE APT 5J
 City State Zip Code
 BROOKLYN NY 11207-9035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11.66538
 Amount of Each Receipt this Period
 125.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. KATHRYN BLACK
 Mailing Address 365 WINDSOR DR NORTH
 City State Zip Code
 OXFORD MS 38655-7092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.66751
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. JOSEPH BOLAND
 Mailing Address 2525 POTOMAC AVE. NE
 City State Zip Code
 ATLANTA GA 30305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11A.3207
 Amount of Each Receipt this Period
 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN K BUSH
Full Name (Last, First, Middle Initial)

Mailing Address 27 WINDING PAT

City MANORVILLE State NY Zip Code 11949-2260

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11.66527

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

B. MARIANNA CARROLL
Full Name (Last, First, Middle Initial)

Mailing Address 1550 PARK CHASE

City CUMMING State GA Zip Code 30041-7622

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.66467

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

C. ELLOINE CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 3716 MAPLEWOOD AVE

City DALLAS State TX Zip Code 75205-2827

FEC ID number of contributing federal political committee. **C**

Name of Employer RET. Occupation RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11.66177

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	575.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ELLOINE CLARK

Mailing Address 3716 MAPLEWOOD AVE

City	State	Zip Code
DALLAS	TX	75205-2827

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RET.	RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2015
Transaction ID : SA11.66263

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PATRICIA DEGEN

Mailing Address 20540 VENTURA BLVD APT 319

City	State	Zip Code
WOODLAND HILLS	CA	91364-6447

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.66472

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CLARK DURDEN

Mailing Address 410 ROSE LN

City	State	Zip Code
DOUGLAS	GA	31533-3314

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
INFORMATION REQUESTED PER BEST EFF	INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2015
Transaction ID : SA11.65870

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1035.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 697
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CLARK DURDEN

Mailing Address 410 ROSE LN

City DOUGLAS State GA Zip Code 31533-3314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 20 / 2015
Transaction ID : SA11.66240

Amount of Each Receipt this Period
35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. WESLEY EATON

Mailing Address 304 BROOKSBY VILLAGE DR

City PEABODY State MA Zip Code 01960

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 13 / 2015
Transaction ID : SA11A.3979

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. H. DUSTIN FILLMORE

Mailing Address 2712 MANORWOOD TRL

City FORT WORTH State TX Zip Code 76109-9589

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
01 / 29 / 2015
Transaction ID : SA11.66488

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 410.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CYNTHIA KAY FISHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 315 ROCK ST APT 1203
 1203
 City LITTLE ROCK State AR Zip Code 72202-5528
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.66481
 Amount of Each Receipt this Period
 50.00
CONTRIBUTION

B. ROBERT GARTHWAIT
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 1367
 City WATERBURY State CT Zip Code 06721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11A.3955
 Amount of Each Receipt this Period
 1000.00
CONTRIBUTION

C. GEORGE GREEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7181 E CAMELBACK RD. STE 906
 City SCOTTSDALE State AZ Zip Code 85251-8214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ME Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2015
Transaction ID : SA11.66403
 Amount of Each Receipt this Period
 100.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. STEPHEN HINDS

Mailing Address 47 LA CACION DR

City BOERNE State TX Zip Code 78006-7968

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11.66578

Amount of Each Receipt this Period
25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JAMES HOWARD

Mailing Address 6221 S 14TH PLACE

City PHOENIX State AZ Zip Code 85042-4414

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation EL ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.66640

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. ERIC DAVID IRWIN

Mailing Address 1314 MARQUETTE AVE APT 2206

City MINNEAPOLIS State MN Zip Code 55403-4131

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11.66621

Amount of Each Receipt this Period
200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES KING
Full Name (Last, First, Middle Initial)

Mailing Address 5017 SAN JOAQUIN DRIVE

City SAN DIEGO State CA Zip Code 92109-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer DLK INVESTMENT MANAGEMENT Occupation INVESTMENT ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **535.00**

Date of Receipt
01 / 23 / 2015

Transaction ID : SA11.66397

Amount of Each Receipt this Period
350.00

CONTRIBUTION

B. DONALD LJUNGREN
Full Name (Last, First, Middle Initial)

Mailing Address 945 CENTURY AVE SW APT 214

City HUTCHINSON State MN Zip Code 55350-3792

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt
01 / 29 / 2015

Transaction ID : SA11.66483

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. SYLVIA MANSON
Full Name (Last, First, Middle Initial)

Mailing Address 113 OCEAN VIEW AVE

City SANTA CRUZ State CA Zip Code 95062-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
02 / 20 / 2015

Transaction ID : SA11.66938

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **135.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 697
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT MATOKA

Mailing Address 140 PERRYVISTA AVE

City State Zip Code
PITTSBURGH PA 15237-4852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF BOOKKEEPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11.66577

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BETH MIKULIN

Mailing Address P.O. BOX 5194

City State Zip Code
WACO TX 76708-0194

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2015
Transaction ID : SA11.66565

Amount of Each Receipt this Period
 75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. EDITH PALMER

Mailing Address 282 LAROE RD

City State Zip Code
CHESTER NY 10918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 13 / 2015
Transaction ID : SA11A.3954

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 697
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GOTTHARD PEARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8199 E SWEET ACACIA DR
 City GOLD CANYON State AZ Zip Code 85118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015
Transaction ID : SA11A.3842
 Amount of Each Receipt this Period
 50.00

B. GOTTHARD PEARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8199 E SWEET ACACIA DR
 City GOLD CANYON State AZ Zip Code 85118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11A.4126
 Amount of Each Receipt this Period
 200.00

C. PAM PHILLIPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 E 173RD AVE
 City LOWELL State IN Zip Code 46356-9346
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SKYSTONE M'SILVER SALES RETAIL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 13 / 2015
Transaction ID : SA11.65772
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PAM PHILLIPS
Full Name (Last, First, Middle Initial)
Mailing Address 103 E 173RD AVE
City LOWELL State IN Zip Code 46356-9346
FEC ID number of contributing federal political committee. **C**
Name of Employer SKYSTONE M'SILVER Occupation SALES RETAIL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.00**

Date of Receipt **02 / 03 / 2015**
Transaction ID : SA11.66534
Amount of Each Receipt this Period **200.00**
CONTRIBUTION

B. EDWARD POITRAS
Full Name (Last, First, Middle Initial)
Mailing Address 949 HAMILTON CIR
City HAINES CITY State FL Zip Code 33844-2431
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 10 / 2015**
Transaction ID : SA11.66905
Amount of Each Receipt this Period **250.00**
CONTRIBUTION

C. KAY POITRAS
Full Name (Last, First, Middle Initial)
Mailing Address 949 HAMILTON CIR
City HAINES CITY State FL Zip Code 33844
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **04 / 13 / 2015**
Transaction ID : SA11A.4012
Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional)..... **520.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. KAY POITRAS

Mailing Address 949 HAMILTON CIR

City HAINES CITY State FL Zip Code 33844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2015
Transaction ID : SA11A.4145

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. THOMAS RASTIN

Mailing Address P.O. BOX 243

City MOUNT VERNON State OH Zip Code 43050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 15 / 2015
Transaction ID : SA11A.3192

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. GEORGE ROBINSON

Mailing Address 5005 RIVERWAY DR

City HOUSTON State TX Zip Code 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2015
Transaction ID : SA11A.3190

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 11250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RANDALL LANE RODINE
Full Name (Last, First, Middle Initial)
Mailing Address 4158 LAKEWOOD TRL

City CLAYTON	State IN	Zip Code 46118-9373
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AERODYNE COMPOSITES GRP	Occupation BUSINESS OWNER
---------------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2015

Transaction ID : SA11.66506

Amount of Each Receipt this Period

80.00

CONTRIBUTION

B. SARAH SEALS
Full Name (Last, First, Middle Initial)
Mailing Address 8538 KINGSLEY CIR

City GRANBURY	State TX	Zip Code 76049-4761
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation NOT EMPLOYED
-----------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.66775

Amount of Each Receipt this Period

75.00

CONTRIBUTION

C. VIRGINIA SEVERNS
Full Name (Last, First, Middle Initial)
Mailing Address 1547 E MYRTLE ST

City MASON CITY	State IL	Zip Code 62664-9601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2015

Transaction ID : SA11.65765

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	205.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT SHAFFER

Mailing Address **POBOX 295**

City **CATLETT** State **VA** Zip Code **20119-0295**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
03 / 13 / 2015
Transaction ID : SA11.66798

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ALVAN SHANE

Mailing Address **2270 N EUCLID AVE**

City **UPLAND** State **CA** Zip Code **91784**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF / BUSINESS MANAGEMENT ASSOCIATES** Occupation **TAX ACCOUNTANT**

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
05 / 05 / 2015
Transaction ID : SA11A.3206

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. JAMES SHANLEY

Mailing Address **P.O. BOX 2161**

City **NEW CASTLE** State **NH** Zip Code **03854-2161**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
01 / 26 / 2015
Transaction ID : SA11.66433

Amount of Each Receipt this Period
125.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **525.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 697
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. CORINNE SPENCE		Date of Receipt MM / DD / YYYY 02 / 06 / 2015 Transaction ID : SA11.66539
Mailing Address 1508 EUREKA ROAD		Amount of Each Receipt this Period 100.00
City ROSEVILLE	State CA	Zip Code 95661-2809
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

Full Name (Last, First, Middle Initial) B. CORINNE SPENCE		Date of Receipt MM / DD / YYYY 05 / 04 / 2015 Transaction ID : SA11A.2784
Mailing Address F508 EUREKA RD		Amount of Each Receipt this Period 500.00
City ROSEVILLE	State CA	Zip Code 95661
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. ROZENE SUPPLE		Date of Receipt MM / DD / YYYY 04 / 10 / 2015 Transaction ID : SA11A.2554
Mailing Address 1850 SMOKE TREE LN		Amount of Each Receipt this Period 225.00
City PALM SPRINGS	State CA	Zip Code 92264
FEC ID number of contributing federal political committee. C		
Name of Employer RADIO	Occupation RADIO	
Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional).....▶	825.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILFORD TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 898

City CANYON State TX Zip Code 79015-0898

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.66708

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

B. FRED TEDESCO
Full Name (Last, First, Middle Initial)

Mailing Address 9216 SPRING RUNBLVD

City BONITA SPRINGS State FL Zip Code 34135-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.66883

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

C. LESTER TIMM
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 282

City BRANDON State SD Zip Code 57005-0282

FEC ID number of contributing federal political committee. **C**

Name of Employer ANDERSON GROUP CPA Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11.66023

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 697
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RAYMOND TOBIN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 710218

City SAN DIEGO	State CA	Zip Code 92171-0218
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 21 / 2015
Transaction ID : SA11.66367

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. LINDA WARENICZ
Full Name (Last, First, Middle Initial)
Mailing Address 827 FLINTLOCK DR

City BEL AIR	State MD	Zip Code 21015-4852
FEC ID number of contributing federal political committee. C		
Name of Employer TWO DIFFERENT HOSPITALS	Occupation MEDICAL RECORDER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
02 / 11 / 2015
Transaction ID : SA11.66597

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. RICHARD WATSON
Full Name (Last, First, Middle Initial)
Mailing Address 1520 SKY VALLEY DRIVE

City RENO	State NV	Zip Code 89523-7994
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Date of Receipt
01 / 21 / 2015
Transaction ID : SA11.66366

Amount of Each Receipt this Period
25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 697
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CHARLES WEIR

Mailing Address 19355 CYPRESS RIDGE TER UNIT 806

City LANSDOWNE	State VA	Zip Code 20176-6916
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2015
Transaction ID : SA11.66422

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BRIAN WORCESTER

Mailing Address 16710 E 44TH AVE

City GREENACRES	State WA	Zip Code 99016-8755
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DECONESS HOSPITAL	Occupation PHARMISCIST
---------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.66448

Amount of Each Receipt this Period
 125.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DALE WRIGHT

Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015
Transaction ID : SA11.66380

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	195.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 697
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. KAREN WRIGHT

Mailing Address P.O. BOX 243

City MOUNT VERNON State OH Zip Code 43050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015

Transaction ID : SA11A.3191

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. SCOTT YEAMAN

Mailing Address 2025 E BAYSHORE RD

City EAST PALO ALTO State CA Zip Code 94303-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
OWNER AUTO COLLISION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11.66362

Amount of Each Receipt this Period
75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1075.00
TOTAL This Period (last page this line number only).....▶	20555.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH State FL Zip Code 32118-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA11.58973

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH State FL Zip Code 32118-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11.63603

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH State FL Zip Code 32118-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
05 / 20 / 2015
Transaction ID : SA11.74247

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1616 S. PENINSULA DR.

City DAYTONA BEACH State FL Zip Code 32118-4948

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015
Transaction ID : SA11.84040

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SCOTT ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 930 W BARRY AVE

City CHICAGO State IL Zip Code 60657-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MANAGEMENT CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.56305

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SCOTT ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 930 W BARRY AVE

City CHICAGO State IL Zip Code 60657-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MANAGEMENT CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2015
Transaction ID : SA11.62461

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. SCOTT ADAMS

Mailing Address 930 W BARRY AVE

City CHICAGO State IL Zip Code 60657-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation MANAGEMENT CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2015
Transaction ID : SA11.63743

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARY ADNEY

Mailing Address 2030 CHESTER BLVD

City RICHMOND State IN Zip Code 47374

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2015
Transaction ID : SA17.3656

Amount of Each Receipt this Period
1000.00

CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. PAT AINLEY

Mailing Address P.O. BOX 3908

City CRESTLINE State CA Zip Code 92325-3908

FEC ID number of contributing federal political committee. **C**

Name of Employer AINLEY ENTERPRISES LLC Occupation PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.55228

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PAT AINLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT
--------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2015

Transaction ID : SA11.59547

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PAT AINLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT
--------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74250

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PAT AINLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3908

City CRESTLINE	State CA	Zip Code 92325-3908
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AINLEY ENTERPRISES LLC	Occupation PROPERTY MANAGEMENT
--------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84317

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. PAT AINLEY

Mailing Address P.O. BOX 3908

City State Zip Code
CRESTLINE CA 92325-3908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AINLEY ENTERPRISES LLC PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015

Transaction ID : SA11.85353

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. PATRICE ALBERT

Mailing Address 400 E HIGH POINT LN

City State Zip Code
COLUMBIA MO 65203-9385

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF MISSOURI TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2015

Transaction ID : SA11.58497

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. PATRICE ALBERT

Mailing Address 400 E HIGH POINT LN

City State Zip Code
COLUMBIA MO 65203-9385

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF MISSOURI TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2015

Transaction ID : SA11.63581

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES & BARBARA ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 JEFFREY PINE LANE
 City CARSON CITY State NV Zip Code 89705-6837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALEXANDER ENERGY Occupation MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.64029
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES & BARBARA ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 JEFFREY PINE LANE
 City CARSON CITY State NV Zip Code 89705-6837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALEXANDER ENERGY Occupation MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84420
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DOUGLAS L. ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 28345 PALOS VERDES DR. E.,
 City RANCHO PALOS VERDE State CA Zip Code 90275-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 16 / 2015
Transaction ID : SA11.74179
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES ALLEN
Full Name (Last, First, Middle Initial)

Mailing Address 6624 N. WINDMONT AVE.

City PARKER	State CO	Zip Code 80134-5939
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FRONTIER AIRLINES	Occupation AIRLINE PILOT
---------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.57364

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES ALLEN
Full Name (Last, First, Middle Initial)

Mailing Address 6624 N. WINDMONT AVE.

City PARKER	State CO	Zip Code 80134-5939
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FRONTIER AIRLINES	Occupation AIRLINE PILOT
---------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80688

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HAZEL ALLISON
Full Name (Last, First, Middle Initial)

Mailing Address 1800 EEASTGAATE DR.

City GREENWOOD	State AR	Zip Code 72936-5424
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED AGE 85
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2015

Transaction ID : SA11.75505

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HAZEL ALLISON
Full Name (Last, First, Middle Initial)
Mailing Address 1800 EEASTGAATE DR.
City GREENWOOD State AR Zip Code 72936-5424
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED AGE 85
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 26 / 2015
Transaction ID : SA11.75530
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HAZEL ALLISON
Full Name (Last, First, Middle Initial)
Mailing Address 1800 EEASTGAATE DR.
City GREENWOOD State AR Zip Code 72936-5424
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED AGE 85
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2015
Transaction ID : SA11.75638
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TED E. AMSBAUGH
Full Name (Last, First, Middle Initial)
Mailing Address 1302 24TH STREET WEST AS ABOVE
City BILLINGS State MT Zip Code 59102-3861
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation NONE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2015
Transaction ID : SA11.72696
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BYRON ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 2021 MHUNTINGTON LANE

City FORT WORTH State TX Zip Code 76110-1743

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.55070

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVE ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 120 COOP SAWMILL RD

City MANCHESTER State CT Zip Code 06040-6866

FEC ID number of contributing federal political committee. **C**

Name of Employer MULTI-SEALS, INC. Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015
Transaction ID : SA11.65296

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN ANGLE
Full Name (Last, First, Middle Initial)

Mailing Address 35 E VIA VERDE ST

City WICHITA State KS Zip Code 67230-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.61877

Amount of Each Receipt this Period
 150.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1650.00**

Date of Receipt **02 / 25 / 2015**
Transaction ID : SA11.62686
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1650.00**

Date of Receipt **03 / 06 / 2015**
Transaction ID : SA11.63618
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1650.00**

Date of Receipt **03 / 13 / 2015**
Transaction ID : SA11.64366
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **600.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 04 / 08 / 2015
Transaction ID : SA11.80409
Amount of Each Receipt this Period 500.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 04 / 15 / 2015
Transaction ID : SA11.81195
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN ANGLE
Full Name (Last, First, Middle Initial)
Mailing Address 35 E VIA VERDE ST
City WICHITA State KS Zip Code 67230-1605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83586
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JEAN ANGLE

Mailing Address 35 E VIA VERDE ST

City WICHITA State KS Zip Code 67230-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.85374

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. FRANK ARANEO

Mailing Address 484 CARPENTER PLACE

City UNION State NJ Zip Code 07083-7414

FEC ID number of contributing federal political committee. **C**

Name of Employer SUMMIT FINANCIAL RESOURCES Occupation FINANCIAL PLANNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015
Transaction ID : SA11.84424

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. WILLIAM ARDIZZONE

Mailing Address 23450 WESTFORD PL

City VALENCIA State CA Zip Code 91354-2102

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.74263

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City State Zip Code
FREMONT CA 94539-7307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2015
Transaction ID : SA11.55977

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City State Zip Code
FREMONT CA 94539-7307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2015
Transaction ID : SA11.64892

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City State Zip Code
FREMONT CA 94539-7307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015
Transaction ID : SA11.73845

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City FREMONT	State CA	Zip Code 94539-7307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2015

Transaction ID : SA11.76616

Amount of Each Receipt this Period

50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City FREMONT	State CA	Zip Code 94539-7307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : SA11.80515

Amount of Each Receipt this Period

50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID ARNESON
Full Name (Last, First, Middle Initial)

Mailing Address 46831 RANCHO HIGUERA RD

City FREMONT	State CA	Zip Code 94539-7307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : SA11.81163

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DAVID ASBURY

Mailing Address 3438 PEACHTREE RD
SUITE 1100

City ATLANTA State GA Zip Code 30326-1555

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTHWESTERN BENEFIT CORPORATION Occupation BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2015
Transaction ID : SA11.58386

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DENNIS AUTRY

Mailing Address 1315 HELEN DR

City WACO State TX Zip Code 76708-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer ADVANCED FLUIDS SOLUTIONS Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.55939

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DENNIS AUTRY

Mailing Address 1315 HELEN DR

City WACO State TX Zip Code 76708-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer ADVANCED FLUIDS SOLUTIONS Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015
Transaction ID : SA11.57805

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DENNIS AUTRY

Mailing Address 1315 HELEN DR

City WACO State TX Zip Code 76708-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer: ADVANCED FLUIDS SOLUTIONS Occupation: SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 02 / 17 / 2015
Transaction ID : SA11.61994

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. GARY A BABB

Mailing Address 2603 GALAHAD DR

City HUNTSVILLE State AL Zip Code 35803-1929

FEC ID number of contributing federal political committee. **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 08 / 2015
Transaction ID : SA11.58009

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. HELEN BABB

Mailing Address 501 PORTOLA ROAD
APT. 20A

City PORTOLA VALLEY State CA Zip Code 94028-7605

FEC ID number of contributing federal political committee. **C**

Name of Employer: HUSBAND AND MYSELF Occupation: HOME MAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt: 01 / 19 / 2015
Transaction ID : SA11.54154

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HELEN BABB
Full Name (Last, First, Middle Initial)
Mailing Address 501 PORTOLA ROAD
APT. 20A
City PORTOLA VALLEY State CA Zip Code 94028-7605
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND AND MYSELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 02 / 16 / 2015
Transaction ID : SA11.56245
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HELEN BABB
Full Name (Last, First, Middle Initial)
Mailing Address 501 PORTOLA ROAD
APT. 20A
City PORTOLA VALLEY State CA Zip Code 94028-7605
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND AND MYSELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 02 / 16 / 2015
Transaction ID : SA11.61905
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HELEN BABB
Full Name (Last, First, Middle Initial)
Mailing Address 501 PORTOLA ROAD
APT. 20A
City PORTOLA VALLEY State CA Zip Code 94028-7605
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND AND MYSELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 05 / 09 / 2015
Transaction ID : SA11.73204
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HELEN BABB
Full Name (Last, First, Middle Initial)
Mailing Address 501 PORTOLA ROAD
APT. 20A
City PORTOLA VALLEY State CA Zip Code 94028-7605
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND AND MYSELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1150.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81955
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HELEN BABB
Full Name (Last, First, Middle Initial)
Mailing Address 501 PORTOLA ROAD
APT. 20A
City PORTOLA VALLEY State CA Zip Code 94028-7605
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND AND MYSELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1150.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81956
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD BALLANTYNE
Full Name (Last, First, Middle Initial)
Mailing Address 523 ISLAND CY
City INDIAN HARBOUR BEA State FL Zip Code 32937-4345
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : SA11.79091
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **350.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM BARFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 3324 SENASAC AVE.

City LONG BEACH	State CA	Zip Code 90808-3826
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY OF LONG BEACH, CA	Occupation RETIRED
--------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : SA11.75736

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM BARFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 3324 SENASAC AVE.

City LONG BEACH	State CA	Zip Code 90808-3826
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY OF LONG BEACH, CA	Occupation RETIRED
--------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77803

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN BARNA
Full Name (Last, First, Middle Initial)

Mailing Address 122 HEATHER COURT

City PALM DESERT	State CA	Zip Code 92260-6748
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.56249

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN BARNA
Full Name (Last, First, Middle Initial)

Mailing Address 122 HEATHER COURT

City PALM DESERT State CA Zip Code 92260-6748

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA11.56815

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN BARNA
Full Name (Last, First, Middle Initial)

Mailing Address 122 HEATHER COURT

City PALM DESERT State CA Zip Code 92260-6748

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11.62331

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT BARND
Full Name (Last, First, Middle Initial)

Mailing Address 4102 MARIANA BUTTE DRIVE

City LOVELAND State CO Zip Code 80537-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer PARKER HANNIFIN CORPORATION Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 26 / 2015
Transaction ID : SA11.56996

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT BARND

Mailing Address 4102 MARIANA BUTTE DRIVE

City State Zip Code
LOVELAND CO 80537-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARKER HANNIFIN CORPORATION RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2015
Transaction ID : SA11.63378

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT BARND

Mailing Address 4102 MARIANA BUTTE DRIVE

City State Zip Code
LOVELAND CO 80537-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PARKER HANNIFIN CORPORATION RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015
Transaction ID : SA11.77503

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. PAT BARTLOW

Mailing Address 1303 HIDDEN PLATEAU CT

City State Zip Code
EL CAJON CA 92019-3656

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A HMMKR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2015
Transaction ID : SA11.67052

Amount of Each Receipt this Period
200.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PAT BARTLOW
Full Name (Last, First, Middle Initial)
Mailing Address 1303 HIDDEN PLATEAU CT
City EL CAJON State CA Zip Code 92019-3656
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation HMMKR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **05 / 06 / 2015**
Transaction ID : SA11.72016
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MYRNA BAUER
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 224
City DONIPHAN State NE Zip Code 68832-0224
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **02 / 17 / 2015**
Transaction ID : SA11.56421
Amount of Each Receipt this Period **150.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MYRNA BAUER
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 224
City DONIPHAN State NE Zip Code 68832-0224
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **02 / 17 / 2015**
Transaction ID : SA11.56426
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **300.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54436

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11.56727

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60392

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63588

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.65189

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD BAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 5065 SR 132

City BATAVIA	State OH	Zip Code 45103-1219
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO	Occupation RETIRED
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74275

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. EDWARD BAVIS

Mailing Address 5065 SR 132

City BATAVIA State OH Zip Code 45103-1219

FEC ID number of contributing federal political committee. **C**

Name of Employer FABACRAFT CO Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83627

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DAVID BEEBE

Mailing Address 115 CAITLIN LANE

City HAMILTON State NJ Zip Code 08691-3368

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA Occupation REINSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.64899

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DAVID BEEBE

Mailing Address 115 CAITLIN LANE

City HAMILTON State NJ Zip Code 08691-3368

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA Occupation REINSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11.72709

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID BEEBE
Full Name (Last, First, Middle Initial)
Mailing Address 115 CAITLIN LANE

City HAMILTON	State NJ	Zip Code 08691-3368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA	Occupation REINSURANCE
------------------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2015

Transaction ID : SA11.73341

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID BEEBE
Full Name (Last, First, Middle Initial)
Mailing Address 115 CAITLIN LANE

City HAMILTON	State NJ	Zip Code 08691-3368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA	Occupation REINSURANCE
------------------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78386

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID BEEBE
Full Name (Last, First, Middle Initial)
Mailing Address 115 CAITLIN LANE

City HAMILTON	State NJ	Zip Code 08691-3368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA	Occupation REINSURANCE
------------------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78879

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID BEEBE
Full Name (Last, First, Middle Initial)

Mailing Address 115 CAITLIN LANE

City HAMILTON	State NJ	Zip Code 08691-3368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA	Occupation REINSURANCE
------------------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80676

Amount of Each Receipt this Period

100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID BEEBE
Full Name (Last, First, Middle Initial)

Mailing Address 115 CAITLIN LANE

City HAMILTON	State NJ	Zip Code 08691-3368
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MUNICH REINSURANCE AMERICA	Occupation REINSURANCE
------------------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84305

Amount of Each Receipt this Period

50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM BELCHER
Full Name (Last, First, Middle Initial)

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008-3911
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN RIGGING	Occupation RIGGER
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57817

Amount of Each Receipt this Period

100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM BELCHER
Full Name (Last, First, Middle Initial)

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008-3911
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN RIGGING	Occupation RIGGER
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.74872

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM BELCHER
Full Name (Last, First, Middle Initial)

Mailing Address 431 VIRGINIA AVE

City CAMPBELL	State CA	Zip Code 95008-3911
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN RIGGING	Occupation RIGGER
--------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83595

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM BELLOT
Full Name (Last, First, Middle Initial)

Mailing Address 9625 S MAIN ST

City CHATHAM	State IL	Zip Code 62629-8669
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE OF ILLINOIS	Occupation RETIRED
---------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74283

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM BELLOT
Full Name (Last, First, Middle Initial)

Mailing Address 9625 S MAIN ST

City CHATHAM State IL Zip Code 62629-8669

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE OF ILLINOIS Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.85429

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALEX BELYAVSKI
Full Name (Last, First, Middle Initial)

Mailing Address 2626 EL CAMINO REAL

City REDWOOD CITY State CA Zip Code 94061-3815

FEC ID number of contributing federal political committee. **C**

Name of Employer COAST LIGHTING Occupation BUYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.85430

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 849 ISLAND POINT LANE

City CHAPIN State SC Zip Code 29036-7602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015

Transaction ID : SA11.72022

Amount of Each Receipt this Period
 20.16

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.16

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 849 ISLAND POINT LANE

City CHAPIN State SC Zip Code 29036-7602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2015
Transaction ID : SA11.73207

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 849 ISLAND POINT LANE

City CHAPIN State SC Zip Code 29036-7602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.74284

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 849 ISLAND POINT LANE

City CHAPIN State SC Zip Code 29036-7602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11.76275

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.77036

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77174

Amount of Each Receipt this Period

15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77768

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77905

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
							10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77982

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
							15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)
Mailing Address 849 ISLAND POINT LANE

City CHAPIN	State SC	Zip Code 29036-7602
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation PSYCHOLOGIST
-----------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78105

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
							15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CATHERINE BENFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 849 ISLAND POINT LANE

City CHAPIN State SC Zip Code 29036-7602

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PSYCHOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.32**

Date of Receipt **05 / 05 / 2015**
Transaction ID : SA11.85433

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD BENNETT
Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 5005

City RANCHO MIRAGE State CA Zip Code 92270-1065

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **02 / 02 / 2015**
Transaction ID : SA11.54627

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD BENNETT
Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 5005

City RANCHO MIRAGE State CA Zip Code 92270-1065

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **02 / 02 / 2015**
Transaction ID : SA11.54630

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
	<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD BENNETT
Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 5005

City RANCHO MIRAGE	State CA	Zip Code 92270-1065
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2015
Transaction ID : SA11.61821

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD BENNETT
Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 5005

City RANCHO MIRAGE	State CA	Zip Code 92270-1065
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.63219

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. YVONNE BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 1019 VAN SICLEN AVE APT 5J

City BROOKLYN	State NY	Zip Code 11207-9035
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60541

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. GERALD BETTS

Mailing Address 535 BUSHNELL LANE

City EUGENE State OR Zip Code 97404-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015

Transaction ID : SA11.57324

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. GERALD BETTS

Mailing Address 535 BUSHNELL LANE

City EUGENE State OR Zip Code 97404-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2015

Transaction ID : SA11.60132

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. GERALD BETTS

Mailing Address 535 BUSHNELL LANE

City EUGENE State OR Zip Code 97404-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.60896

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GERALD BETTS
Full Name (Last, First, Middle Initial)
Mailing Address 535 BUSHNELL LANE
City EUGENE State OR Zip Code 97404-2117
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **265.00**

Date of Receipt **02 / 18 / 2015**
Transaction ID : SA11.62274
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GERALD BETTS
Full Name (Last, First, Middle Initial)
Mailing Address 535 BUSHNELL LANE
City EUGENE State OR Zip Code 97404-2117
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **265.00**

Date of Receipt **02 / 20 / 2015**
Transaction ID : SA11.62404
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GERALD BETTS
Full Name (Last, First, Middle Initial)
Mailing Address 535 BUSHNELL LANE
City EUGENE State OR Zip Code 97404-2117
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **265.00**

Date of Receipt **03 / 06 / 2015**
Transaction ID : SA11.63398
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **45.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. GERALD BETTS

Mailing Address 535 BUSHNELL LANE

City EUGENE State OR Zip Code 97404-2117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2015
Transaction ID : SA11.80498

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LITA Z. BIEJO

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.54244

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LITA Z. BIEJO

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54360

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LITA Z. BIEJO
Full Name (Last, First, Middle Initial)

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2015
Transaction ID : SA11.64474

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LITA Z. BIEJO
Full Name (Last, First, Middle Initial)

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2015
Transaction ID : SA11.76711

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LITA Z. BIEJO
Full Name (Last, First, Middle Initial)

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.82776

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LITA Z. BIEJO
Full Name (Last, First, Middle Initial)

Mailing Address 9555 LOS ANGELES AVE

City MOORPARK State CA Zip Code 93021-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.85447

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA BIGGI
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 29

City HOCKLEY State TX Zip Code 77447-0029

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation RETIRED/ ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.63379

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOE BILLION
Full Name (Last, First, Middle Initial)

Mailing Address 32 KEAN DRIVE

City BOZEMAN State MT Zip Code 59718-8706

FEC ID number of contributing federal political committee. **C**

Name of Employer J C BILLION INC Occupation AUTO SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.64915

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOE BILLION
Full Name (Last, First, Middle Initial)
Mailing Address 32 KEAN DRIVE

City BOZEMAN	State MT	Zip Code 59718-8706
FEC ID number of contributing federal political committee. C		
Name of Employer J C BILLION INC	Occupation AUTO SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
03 / 31 / 2015
Transaction ID : SA11.65444

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOE BILLION
Full Name (Last, First, Middle Initial)
Mailing Address 32 KEAN DRIVE

City BOZEMAN	State MT	Zip Code 59718-8706
FEC ID number of contributing federal political committee. C		
Name of Employer J C BILLION INC	Occupation AUTO SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
05 / 05 / 2015
Transaction ID : SA11.85451

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KATHRYN BLACK
Full Name (Last, First, Middle Initial)
Mailing Address 365 WINDSOR DR NORTH

City OXFORD	State MS	Zip Code 38655-7092
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
03 / 09 / 2015
Transaction ID : SA11.63966

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KATHRYN BLACK
Full Name (Last, First, Middle Initial)

Mailing Address 365 WINDSOR DR NORTH

City	State	Zip Code
OXFORD	MS	38655-7092

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11.81333

Amount of Each Receipt this Period

 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KATHRYN BLACK
Full Name (Last, First, Middle Initial)

Mailing Address 365 WINDSOR DR NORTH

City	State	Zip Code
OXFORD	MS	38655-7092

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NONE	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.85455

Amount of Each Receipt this Period

 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEFFREY BLOMSNESS
Full Name (Last, First, Middle Initial)

Mailing Address 15 WILLOW BAY DRIVE

City	State	Zip Code
SOUTH BARRINGTON	IL	60010-7116

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
NORTH AMERICAN MIDWAY ENTERTAINME	CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2015
Transaction ID : SA11.85225

Amount of Each Receipt this Period

 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> <input type="text"/> 700.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57219

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57573

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61206

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2015

Transaction ID : SA11.75533

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76346

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2015

Transaction ID : SA11.77100

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78975

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81583

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN BOGGS
Full Name (Last, First, Middle Initial)
Mailing Address 6622 ST. RT. 361

City KINGSTON	State OH	Zip Code 45644-9637
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2015

Transaction ID : SA11.82069

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LONNIE L BONE
Full Name (Last, First, Middle Initial)
Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK	State IL	Zip Code 60525-4487
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER/VOLUNTEER MISSIONARY	Occupation HOMEMAKER/MISSIONARY
----------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2015
Transaction ID : SA11.72989

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LONNIE L BONE
Full Name (Last, First, Middle Initial)
Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK	State IL	Zip Code 60525-4487
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER/VOLUNTEER MISSIONARY	Occupation HOMEMAKER/MISSIONARY
----------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2015
Transaction ID : SA11.73396

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LONNIE L BONE
Full Name (Last, First, Middle Initial)
Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK	State IL	Zip Code 60525-4487
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER/VOLUNTEER MISSIONARY	Occupation HOMEMAKER/MISSIONARY
----------------------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 03 / 2015
Transaction ID : SA11.79085

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LONNIE L BONE

Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK State IL Zip Code 60525-4487

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER/VOLUNTEER MISSIONARY** Occupation: **HOMEMAKER/MISSIONARY**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt: **04 / 23 / 2015**

Transaction ID : **SA11.81730**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MRS LONNIE LEE BONE

Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK State IL Zip Code 60525-4487

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER/VOLUNTEER MISSIONARY** Occupation: **HOMEMAKER/MISSIONARY**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt: **02 / 05 / 2015**

Transaction ID : **SA11.60981**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MRS LONNIE LEE BONE

Mailing Address 111 ACACIA DR

City INDIAN HEAD PARK State IL Zip Code 60525-4487

FEC ID number of contributing federal political committee. **C**

Name of Employer: **HOMEMAKER/VOLUNTEER MISSIONARY** Occupation: **HOMEMAKER/MISSIONARY**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt: **03 / 16 / 2015**

Transaction ID : **SA11.64889**

Amount of Each Receipt this Period: **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **150.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HOWARD BOSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2395 REDWOOD AVE
SPACE # 78

City GRANTS PASS State OR Zip Code 97527-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation DISABLED VETERAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
01 / 16 / 2015
Transaction ID : SA11.54129

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HOWARD BOSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2395 REDWOOD AVE
SPACE # 78

City GRANTS PASS State OR Zip Code 97527-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation DISABLED VETERAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.54894

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HOWARD BOSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2395 REDWOOD AVE
SPACE # 78

City GRANTS PASS State OR Zip Code 97527-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation DISABLED VETERAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2015
Transaction ID : SA11.63939

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HOWARD BOSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2395 REDWOOD AVE
SPACE # 78

City GRANTS PASS State OR Zip Code 97527-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation DISABLED VETERAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 19 / 2015
Transaction ID : SA11.65079

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HOWARD BOSCH
Full Name (Last, First, Middle Initial)

Mailing Address 2395 REDWOOD AVE
SPACE # 78

City GRANTS PASS State OR Zip Code 97527-6258

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED Occupation DISABLED VETERAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 21 / 2015
Transaction ID : SA11.74883

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RONALD BOSS
Full Name (Last, First, Middle Initial)

Mailing Address 977 COACHWAY

City ANNAPOLIS State MD Zip Code 21401-6413

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt
02 / 05 / 2015
Transaction ID : SA11.55594

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 77 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2015

Transaction ID : SA11.56753

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2015

Transaction ID : SA11.58348

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60762

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 78 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.62508

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2015

Transaction ID : SA11.62757

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77239

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78826

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2015

Transaction ID : SA11.82247

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RONALD BOSS
Full Name (Last, First, Middle Initial)
Mailing Address 977 COACHWAY

City ANNAPOLIS	State MD	Zip Code 21401-6413
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85475

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.55926

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.59638

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60707

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2015

Transaction ID : SA11.62333

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.63177

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63508

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
20.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74303

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : SA11.75741

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77393

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 83 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78612

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81491

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JUDITH BOWEN
Full Name (Last, First, Middle Initial)
Mailing Address 6460 PEPPERDINE CIR

City MOORPARK	State CA	Zip Code 93021-1418
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.82425

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GUY BOWERS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1082

City RUIDOSO	State NM	Zip Code 88355-1082
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77381

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAN BRAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 201 E SANTA ROSA

City CICTORIA	State TX	Zip Code 77901-8124
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation SELF EMPLOYED
--------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.63148

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEWIS BRERETON
Full Name (Last, First, Middle Initial)
Mailing Address 9225 CLOVER VALLEY

City DALLAS	State TX	Zip Code 75243-6205
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WELLSFARGO ADVISORS	Occupation STOCKBROKER
-----------------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63615

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEWIS BRERETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9225 CLOVER VALLEY
 City DALLAS State TX Zip Code 75243-6205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WELLSFARGO ADVISORS STOCKBROKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 06 / 05 / 2015
Transaction ID : SA11.76163
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEWIS BRERETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9225 CLOVER VALLEY
 City DALLAS State TX Zip Code 75243-6205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WELLSFARGO ADVISORS STOCKBROKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 06 / 30 / 2015
Transaction ID : SA11.78072
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALBERT R. BRESNIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2224 24TH ST.
 City SANTA MONICA State CA Zip Code 90405-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 02 / 04 / 2015
Transaction ID : SA11.54839
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 86 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALBERT R. BRESNIK
Full Name (Last, First, Middle Initial)

Mailing Address 2224 24TH ST.

City SANTA MONICA	State CA	Zip Code 90405-1811
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.58635

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALBERT R. BRESNIK
Full Name (Last, First, Middle Initial)

Mailing Address 2224 24TH ST.

City SANTA MONICA	State CA	Zip Code 90405-1811
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : SA11.72993

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALBERT R. BRESNIK
Full Name (Last, First, Middle Initial)

Mailing Address 2224 24TH ST.

City SANTA MONICA	State CA	Zip Code 90405-1811
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2015

Transaction ID : SA11.74042

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALBERT R. BRESNIK
Full Name (Last, First, Middle Initial)
Mailing Address 2224 24TH ST.
City SANTA MONICA State CA Zip Code 90405-1811
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 340.00

Date of Receipt 04 / 22 / 2015
Transaction ID : SA11.81609
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALBERT R. BRESNIK
Full Name (Last, First, Middle Initial)
Mailing Address 2224 24TH ST.
City SANTA MONICA State CA Zip Code 90405-1811
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 340.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84312
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NELSON BROWN
Full Name (Last, First, Middle Initial)
Mailing Address 14324 N 800 E
City ODON State IN Zip Code 47562-5303
FEC ID number of contributing federal political committee. **C**
Name of Employer SAIC Occupation PART-TIME
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 390.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.54431
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 88 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NELSON BROWN
Full Name (Last, First, Middle Initial)
Mailing Address 14324 N 800 E

City ODON	State IN	Zip Code 47562-5303
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAIC	Occupation PART-TIME
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11.57033

Amount of Each Receipt this Period
35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NELSON BROWN
Full Name (Last, First, Middle Initial)
Mailing Address 14324 N 800 E

City ODON	State IN	Zip Code 47562-5303
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAIC	Occupation PART-TIME
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA11.62694

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NELSON BROWN
Full Name (Last, First, Middle Initial)
Mailing Address 14324 N 800 E

City ODON	State IN	Zip Code 47562-5303
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAIC	Occupation PART-TIME
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76265

Amount of Each Receipt this Period
35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANDREW BURTON
Full Name (Last, First, Middle Initial)

Mailing Address 304281 E 1800 RD

City RATLIFF CITY	State OK	Zip Code 73481-5831
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11.76594

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ANDREW BURTON
Full Name (Last, First, Middle Initial)

Mailing Address 304281 E 1800 RD

City RATLIFF CITY	State OK	Zip Code 73481-5831
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2015
Transaction ID : SA11.76777

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ANDREW BURTON
Full Name (Last, First, Middle Initial)

Mailing Address 304281 E 1800 RD

City RATLIFF CITY	State OK	Zip Code 73481-5831
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.78054

Amount of Each Receipt this Period
35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 92 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN K BUSH
Full Name (Last, First, Middle Initial)
Mailing Address 27 WINDING PAT

City MANORVILLE	State NY	Zip Code 11949-2260
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
01 / 01 / 2015
Transaction ID : SA11.54087

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN K BUSH
Full Name (Last, First, Middle Initial)
Mailing Address 27 WINDING PAT

City MANORVILLE	State NY	Zip Code 11949-2260
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
01 / 28 / 2015
Transaction ID : SA11.54433

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN K BUSH
Full Name (Last, First, Middle Initial)
Mailing Address 27 WINDING PAT

City MANORVILLE	State NY	Zip Code 11949-2260
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
03 / 03 / 2015
Transaction ID : SA11.57378

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN K BUSH
Full Name (Last, First, Middle Initial)
Mailing Address 27 WINDING PAT
City MANORVILLE State NY Zip Code 11949-2260
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 290.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA11.80341
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FAREL J BYRD
Full Name (Last, First, Middle Initial)
Mailing Address 986 SUGAR LANE
City COLLIERVILLE State TN Zip Code 38017-8645
FEC ID number of contributing federal political committee. **C**
Name of Employer FAREL BYRD, CPA, PA Occupation CPA
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 450.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.55993
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FAREL J BYRD
Full Name (Last, First, Middle Initial)
Mailing Address 986 SUGAR LANE
City COLLIERVILLE State TN Zip Code 38017-8645
FEC ID number of contributing federal political committee. **C**
Name of Employer FAREL BYRD, CPA, PA Occupation CPA
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 450.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.57806
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... 225.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 94 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FAREL J BYRD
Full Name (Last, First, Middle Initial)
Mailing Address 986 SUGAR LANE

City COLLIERVILLE	State TN	Zip Code 38017-8645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FAREL BYRD, CPA, PA	Occupation CPA
-----------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60758

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FAREL J BYRD
Full Name (Last, First, Middle Initial)
Mailing Address 986 SUGAR LANE

City COLLIERVILLE	State TN	Zip Code 38017-8645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FAREL BYRD, CPA, PA	Occupation CPA
-----------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2015

Transaction ID : SA11.76403

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FAREL J BYRD
Full Name (Last, First, Middle Initial)
Mailing Address 986 SUGAR LANE

City COLLIERVILLE	State TN	Zip Code 38017-8645
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FAREL BYRD, CPA, PA	Occupation CPA
-----------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84397

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID CALKINS
Full Name (Last, First, Middle Initial)
Mailing Address 1495 SOPLO RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4422
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SUNRISE MEDICAL GROUP	Occupation PHYSICIAN
-------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2015

Transaction ID : SA11.58357

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID CALKINS
Full Name (Last, First, Middle Initial)
Mailing Address 1495 SOPLO RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4422
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SUNRISE MEDICAL GROUP	Occupation PHYSICIAN
-------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2015

Transaction ID : SA11.79570

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID CALKINS
Full Name (Last, First, Middle Initial)
Mailing Address 1495 SOPLO RD SE

City ALBUQUERQUE	State NM	Zip Code 87123-4422
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SUNRISE MEDICAL GROUP	Occupation PHYSICIAN
-------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80680

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID CALKINS
Full Name (Last, First, Middle Initial)
Mailing Address 1495 SOPLO RD SE

City	State	Zip Code
ALBUQUERQUE	NM	87123-4422

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
SUNRISE MEDICAL GROUP	PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2015

Transaction ID : SA11.81968

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.

City	State	Zip Code
WAYNESVILLE	NC	28786-6747

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.54546

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.

City	State	Zip Code
WAYNESVILLE	NC	28786-6747

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SA11.59309

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.
City WAYNESVILLE State NC Zip Code 28786-6747
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60201
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.
City WAYNESVILLE State NC Zip Code 28786-6747
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61582
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.
City WAYNESVILLE State NC Zip Code 28786-6747
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.63542
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 98 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.
City WAYNESVILLE State NC Zip Code 28786-6747
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 04 / 2015
Transaction ID : SA11.79277
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THEO CAMLIN
Full Name (Last, First, Middle Initial)
Mailing Address 47 MEADOWOOD LN.
City WAYNESVILLE State NC Zip Code 28786-6747
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 07 / 2015
Transaction ID : SA11.80222
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD
City SPARKS State NV Zip Code 89431-1149
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 570.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 05 / 2015
Transaction ID : SA11.55366
Amount of Each Receipt this Period
15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 99 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD

City SPARKS	State NV	Zip Code 89431-1149
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.59529

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD

City SPARKS	State NV	Zip Code 89431-1149
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63310

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD

City SPARKS	State NV	Zip Code 89431-1149
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76043

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 100 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD
City SPARKS State NV Zip Code 89431-1149
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 570.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2015
Transaction ID : SA11.79514
Amount of Each Receipt this Period
15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DANIEL CARPENTER
Full Name (Last, First, Middle Initial)
Mailing Address 5775 WEDEKIND RD
City SPARKS State NV Zip Code 89431-1149
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 570.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015
Transaction ID : SA11.85555
Amount of Each Receipt this Period
15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT CARTER
Full Name (Last, First, Middle Initial)
Mailing Address 22010 SOMERTON LANE
City SAN ANTONIO State TX Zip Code 78260-3529
FEC ID number of contributing federal political committee. **C**
Name of Employer HFM SERVICES, INC. Occupation TAX ACCOUNTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.54792
Amount of Each Receipt this Period
50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 101 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 22010 SOMERTON LANE

City SAN ANTONIO State TX Zip Code 78260-3529

FEC ID number of contributing federal political committee. **C**

Name of Employer HFM SERVICES, INC. Occupation TAX ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015

Transaction ID : SA11.73002

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 22010 SOMERTON LANE

City SAN ANTONIO State TX Zip Code 78260-3529

FEC ID number of contributing federal political committee. **C**

Name of Employer HFM SERVICES, INC. Occupation TAX ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015

Transaction ID : SA11.74333

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 22010 SOMERTON LANE

City SAN ANTONIO State TX Zip Code 78260-3529

FEC ID number of contributing federal political committee. **C**

Name of Employer HFM SERVICES, INC. Occupation TAX ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.77715

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 102 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DORIS CASSAN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 68428

City SEATTLE	State WA	Zip Code 98168-0428
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation SELF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015
Transaction ID : SA11.83638

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JO ANNE CAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 80 SUMMIT RIDGE DRIVE

City BRANDON	State MS	Zip Code 39042-2507
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation TRAVEL AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 592.00	

Date of Receipt
MM / DD / YYYY
02 / 20 / 2015
Transaction ID : SA11.56734

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JO ANNE CAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 80 SUMMIT RIDGE DRIVE

City BRANDON	State MS	Zip Code 39042-2507
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation TRAVEL AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 592.00	

Date of Receipt
MM / DD / YYYY
06 / 16 / 2015
Transaction ID : SA11.77064

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 103 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JO ANNE CAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 80 SUMMIT RIDGE DRIVE
City BRANDON State MS Zip Code 39042-2507
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation TRAVEL AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 592.00

Date of Receipt 06 / 29 / 2015
Transaction ID : SA11.77542
Amount of Each Receipt this Period 5.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)
Mailing Address 38 RUNNING OAK DR.
City BLUFFTON State SC Zip Code 29910-4444
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 03 / 02 / 2015
Transaction ID : SA11.57203
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)
Mailing Address 38 RUNNING OAK DR.
City BLUFFTON State SC Zip Code 29910-4444
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57519
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 25.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 104 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)

Mailing Address 38 RUNNING OAK DR.

City BLUFFTON	State SC	Zip Code 29910-4444
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2015

Transaction ID : SA11.62932

Amount of Each Receipt this Period

3	.	00
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3.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)

Mailing Address 38 RUNNING OAK DR.

City BLUFFTON	State SC	Zip Code 29910-4444
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2015

Transaction ID : SA11.64976

Amount of Each Receipt this Period

1	.	00
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10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)

Mailing Address 38 RUNNING OAK DR.

City BLUFFTON	State SC	Zip Code 29910-4444
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SA11.65204

Amount of Each Receipt this Period

1	.	00
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10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>25.00</td></tr></table>	25.00
25.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 105 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)
Mailing Address 38 RUNNING OAK DR.
City BLUFFTON State SC Zip Code 29910-4444
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.78461
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)
Mailing Address 38 RUNNING OAK DR.
City BLUFFTON State SC Zip Code 29910-4444
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.84475
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CAROL CHADBOURNE
Full Name (Last, First, Middle Initial)
Mailing Address 38 RUNNING OAK DR.
City BLUFFTON State SC Zip Code 29910-4444
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.84483
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 106 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57475

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.60949

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11.64855

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 107 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
06 / 05 / 2015
Transaction ID : SA11.76069

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
04 / 05 / 2015
Transaction ID : SA11.79457

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BRUCE CHAMPOUILLON
Full Name (Last, First, Middle Initial)

Mailing Address 505 WHITTIER STREET
BRIDGEWATER CROSSING

City DAVENPORT State FL Zip Code 33896-7848

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED Occupation RETIRED BANK VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
241.00

Date of Receipt
05 / 05 / 2015
Transaction ID : SA11.85573

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 108 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GEORGE CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2405 RAMBLING RD.
2405 RAMBLING RD.

City EDMOND State OK Zip Code 73025-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer OKC PUBLIC SCHOOLS Occupation RETIRED EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
01 / 28 / 2015
Transaction ID : SA11.54382

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2405 RAMBLING RD.
2405 RAMBLING RD.

City EDMOND State OK Zip Code 73025-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer OKC PUBLIC SCHOOLS Occupation RETIRED EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2015
Transaction ID : SA11.57568

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GEORGE CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2405 RAMBLING RD.
2405 RAMBLING RD.

City EDMOND State OK Zip Code 73025-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer OKC PUBLIC SCHOOLS Occupation RETIRED EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2015
Transaction ID : SA11.58183

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 109 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GEORGE CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2405 RAMBLING RD.
2405 RAMBLING RD.

City EDMOND State OK Zip Code 73025-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer OKC PUBLIC SCHOOLS Occupation RETIRED EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
05 / 07 / 2015
Transaction ID : SA11.72729

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2405 RAMBLING RD.
2405 RAMBLING RD.

City EDMOND State OK Zip Code 73025-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer OKC PUBLIC SCHOOLS Occupation RETIRED EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.83048

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HENRY CHILDS
Full Name (Last, First, Middle Initial)

Mailing Address 1756 BLYTHEWOOD LOOP

City THE VILLAGES State FL Zip Code 32162-2235

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
02 / 10 / 2015
Transaction ID : SA11.56023

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 110 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HENRY CHILDS
Full Name (Last, First, Middle Initial)
Mailing Address 1756 BLYTHEWOOD LOOP

City THE VILLAGES	State FL	Zip Code 32162-2235
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61982

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HENRY CHILDS
Full Name (Last, First, Middle Initial)
Mailing Address 1756 BLYTHEWOOD LOOP

City THE VILLAGES	State FL	Zip Code 32162-2235
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA11.62734

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HENRY CHILDS
Full Name (Last, First, Middle Initial)
Mailing Address 1756 BLYTHEWOOD LOOP

City THE VILLAGES	State FL	Zip Code 32162-2235
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : SA11.73006

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BUENA S CHRISTIANSEN
Full Name (Last, First, Middle Initial)
Mailing Address 4435 KIRK RD.
City SAN JOSE State CA Zip Code 95124-4820
FEC ID number of contributing federal political committee. **C**
Name of Employer SANTA CLARA VALLEY MED. CENTER Occupation REGISTERED NURSE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.54353
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BUENA S CHRISTIANSEN
Full Name (Last, First, Middle Initial)
Mailing Address 4435 KIRK RD.
City SAN JOSE State CA Zip Code 95124-4820
FEC ID number of contributing federal political committee. **C**
Name of Employer SANTA CLARA VALLEY MED. CENTER Occupation REGISTERED NURSE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.59889
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BUENA S CHRISTIANSEN
Full Name (Last, First, Middle Initial)
Mailing Address 4435 KIRK RD.
City SAN JOSE State CA Zip Code 95124-4820
FEC ID number of contributing federal political committee. **C**
Name of Employer SANTA CLARA VALLEY MED. CENTER Occupation REGISTERED NURSE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.59901
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 112 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BUENA S CHRISTIANSEN
Full Name (Last, First, Middle Initial)
Mailing Address 4435 KIRK RD.
City SAN JOSE State CA Zip Code 95124-4820
FEC ID number of contributing federal political committee. **C**
Name of Employer SANTA CLARA VALLEY MED. CENTER Occupation REGISTERED NURSE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **320.00**

Date of Receipt **05 / 21 / 2015**
Transaction ID : SA11.74912
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DR PAM CLARK
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 11695
City FT. MOHAVE State AZ Zip Code 86427-1695
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **03 / 09 / 2015**
Transaction ID : SA11.64032
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KIRK CLARK
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 938
City MCALLEN State TX Zip Code 78505-0938
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation AUTOMOBILE DEALER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **850.00**

Date of Receipt **01 / 29 / 2015**
Transaction ID : SA11.54572
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **400.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RALPH CLINARD
Full Name (Last, First, Middle Initial)

Mailing Address 3306 CHARTREUSE WAY

City HOUSTON State TX Zip Code 77082-6857

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015

Transaction ID : SA11.56191

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RALPH CLINARD
Full Name (Last, First, Middle Initial)

Mailing Address 3306 CHARTREUSE WAY

City HOUSTON State TX Zip Code 77082-6857

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015

Transaction ID : SA11.56420

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RALPH CLINARD
Full Name (Last, First, Middle Initial)

Mailing Address 3306 CHARTREUSE WAY

City HOUSTON State TX Zip Code 77082-6857

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2015

Transaction ID : SA11.59565

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 115 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DUNCAN COCROFT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 195

City BOCA GRANDE	State FL	Zip Code 33921-0195
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPL.	Occupation CONSULTANT
--------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.64034

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DUNCAN COCROFT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 195

City BOCA GRANDE	State FL	Zip Code 33921-0195
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPL.	Occupation CONSULTANT
--------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83582

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. STEVEN R. COHEN
Full Name (Last, First, Middle Initial)
Mailing Address 730 CARPENTER ROAD

City ALEXANDRIA	State VA	Zip Code 22314-6226
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EMCUBE, INC.	Occupation MANAGER
----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57793

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 116 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEVEN R. COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 730 CARPENTER ROAD

City ALEXANDRIA State VA Zip Code 22314-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer EMCUBE, INC. Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA11.62677

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. STEVEN R. COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 730 CARPENTER ROAD

City ALEXANDRIA State VA Zip Code 22314-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer EMCUBE, INC. Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015
Transaction ID : SA11.74053

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. STEVEN R. COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 730 CARPENTER ROAD

City ALEXANDRIA State VA Zip Code 22314-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer EMCUBE, INC. Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2015
Transaction ID : SA11.79062

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 117 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEVEN R. COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 730 CARPENTER ROAD

City ALEXANDRIA State VA Zip Code 22314-6226

FEC ID number of contributing federal political committee. **C**

Name of Employer EMCUBE, INC. Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83524

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD COLEA
Full Name (Last, First, Middle Initial)

Mailing Address 2 BITTERSWEET LANE

City GLEN COVE State NY Zip Code 11542-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : SA11.75581

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD COLEA
Full Name (Last, First, Middle Initial)

Mailing Address 2 BITTERSWEET LANE

City GLEN COVE State NY Zip Code 11542-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11.76270

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 118 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD COLEA
Full Name (Last, First, Middle Initial)

Mailing Address 2 BITTERSWEET LANE

City GLEN COVE State NY Zip Code 11542-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2015
Transaction ID : SA11.77183

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD COLEA
Full Name (Last, First, Middle Initial)

Mailing Address 2 BITTERSWEET LANE

City GLEN COVE State NY Zip Code 11542-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2015
Transaction ID : SA11.81630

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARIA CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 36 ALLERTON ST

City BROOKLINE State MA Zip Code 02445-7726

FEC ID number of contributing federal political committee. **C**

Name of Employer POLYVINYL FILMS Occupation MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : SA11.73427

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 119 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARIA CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 36 ALLERTON ST

City State Zip Code
BROOKLINE MA 02445-7726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
POLYVINYL FILMS MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2015

Transaction ID : SA11.73428

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARIA CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 36 ALLERTON ST

City State Zip Code
BROOKLINE MA 02445-7726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
POLYVINYL FILMS MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2015

Transaction ID : SA11.74055

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARIA CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 36 ALLERTON ST

City State Zip Code
BROOKLINE MA 02445-7726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
POLYVINYL FILMS MARKETING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
06 / 17 / 2015

Transaction ID : SA11.77128

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 120 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHAEL CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 9360 NORTH SPRUCE RD

City RIVER HILLS State WI Zip Code 53217-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.77556

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHAEL CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 9360 NORTH SPRUCE RD

City RIVER HILLS State WI Zip Code 53217-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2015

Transaction ID : SA11.79408

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MICHAEL CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 9360 NORTH SPRUCE RD

City RIVER HILLS State WI Zip Code 53217-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015

Transaction ID : SA11.80679

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MICHAEL CONNOR

Mailing Address 9360 NORTH SPRUCE RD

City RIVER HILLS State WI Zip Code 53217-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **04 / 26 / 2015**

Transaction ID : SA11.82253

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ELSA COX

Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE State CA Zip Code 92057-6304

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **02 / 07 / 2015**

Transaction ID : SA11.55779

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ELSA COX

Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE State CA Zip Code 92057-6304

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt **02 / 25 / 2015**

Transaction ID : SA11.56981

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **100.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 122 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61669

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61857

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77206

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 123 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77507

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78832

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ELSA COX
Full Name (Last, First, Middle Initial)
Mailing Address 5174 ALAMOSA PARK DRIVE

City OCEANSIDE	State CA	Zip Code 92057-6304
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE - RETIRED	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83207

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 125 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.56829

Amount of Each Receipt this Period

960.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.57160

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.57421

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 126 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.57446

Amount of Each Receipt this Period

960.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.58604

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.58927

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 127 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.59273

Amount of Each Receipt this Period

960.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2015

Transaction ID : SA11.61840

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61973

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 128 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA11.65381

Amount of Each Receipt this Period

960.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72113

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2015

Transaction ID : SA11.74057

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 129 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80242

Amount of Each Receipt this Period

960.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2015

Transaction ID : SA11.81027

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81320

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 130 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.82970

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SA11.84878

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANK COYNE
Full Name (Last, First, Middle Initial)
Mailing Address 41 GORWIN DRIVE

City HANSON	State MA	Zip Code 02341-1309
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SHAW'S SUPERMARKETS	Occupation GROCERY CLERK
-----------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85624

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 131 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JENNY CRAIG

Mailing Address 11601 WILSHIRE BLVD

City State Zip Code
LOS ANGELES CA 90025-0509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : SA11.83653

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MONTE CRAIG

Mailing Address 59 WARRINGTON CT

City State Zip Code
LAKE BLUFF IL 60044-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 20 / 2015
Transaction ID : SA11.54159

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MONTE CRAIG

Mailing Address 59 WARRINGTON CT

City State Zip Code
LAKE BLUFF IL 60044-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 24 / 2015
Transaction ID : SA11.81754

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 132 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ALBERT CREWS

Mailing Address 444 S WATERWAY DR

City State Zip Code
SATELLITE BEACH FL 32937-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

Transaction ID : **SA11.64895**

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ALBERT CREWS

Mailing Address 444 S WATERWAY DR

City State Zip Code
SATELLITE BEACH FL 32937-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2015

Transaction ID : **SA11.74358**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ALBERT CREWS

Mailing Address 444 S WATERWAY DR

City State Zip Code
SATELLITE BEACH FL 32937-3834

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2015

Transaction ID : **SA11.79064**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN CREWS
Full Name (Last, First, Middle Initial)
Mailing Address 35433 ASHMORE DRIVE
City EUSTIS State FL Zip Code 32736-9031
FEC ID number of contributing federal political committee. **C**
Name of Employer US ARMY Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **720.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : SA11.78235
Amount of Each Receipt this Period **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JIMMY CROTTS
Full Name (Last, First, Middle Initial)
Mailing Address 170D EAST MAIN ST. PMB 280
City HENDERSONVILLE State TN Zip Code 37075-3952
FEC ID number of contributing federal political committee. **C**
Name of Employer PARTNER OWNER OF APPALACHIAN PIPELINE Occupation PIPELINE CONTRACTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 16 / 2015**
Transaction ID : SA11.81340
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RODDIE CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 2145 RIVER FALLS DR
City ROSWELL State GA Zip Code 30076-5122
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation DENTIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.54930
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **305.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 134 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RODDIE CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 2145 RIVER FALLS DR

City ROSWELL	State GA	Zip Code 30076-5122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DENTIST
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78248

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RODDIE CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 2145 RIVER FALLS DR

City ROSWELL	State GA	Zip Code 30076-5122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DENTIST
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.79072

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RODDIE CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 2145 RIVER FALLS DR

City ROSWELL	State GA	Zip Code 30076-5122
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation DENTIST
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83584

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	▶	300.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 135 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RODDIE CROUCH
Full Name (Last, First, Middle Initial)

Mailing Address 2145 RIVER FALLS DR

City ROSWELL State GA Zip Code 30076-5122

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2015

Transaction ID : SA11.85237

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HENRY CUBBERLY
Full Name (Last, First, Middle Initial)

Mailing Address 119 POINSETTIA DR

City LEESBURG State FL Zip Code 34788-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer ----- Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11.57909

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HENRY CUBBERLY
Full Name (Last, First, Middle Initial)

Mailing Address 119 POINSETTIA DR

City LEESBURG State FL Zip Code 34788-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer ----- Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015

Transaction ID : SA11.61318

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. HENRY CUBBERLY

Mailing Address 119 POINSETTIA DR

City State Zip Code
LEESBURG FL 34788-2629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
----- RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 11 / 2015
Transaction ID : SA11.61702

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MIKE CURTIS

Mailing Address 761 FAIR OAKS DRIVE

City State Zip Code
ALAMO CA 94507-1457

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2015
Transaction ID : SA11.54426

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MIKE CURTIS

Mailing Address 761 FAIR OAKS DRIVE

City State Zip Code
ALAMO CA 94507-1457

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 30 / 2015
Transaction ID : SA11.60065

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 137 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MIKE CURTIS
Full Name (Last, First, Middle Initial)
Mailing Address 761 FAIR OAKS DRIVE

City ALAMO	State CA	Zip Code 94507-1457
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83423

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MIKE CURTIS
Full Name (Last, First, Middle Initial)
Mailing Address 761 FAIR OAKS DRIVE

City ALAMO	State CA	Zip Code 94507-1457
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83443

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MIKE CURTIS
Full Name (Last, First, Middle Initial)
Mailing Address 761 FAIR OAKS DRIVE

City ALAMO	State CA	Zip Code 94507-1457
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85640

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 138 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD DAUM
Full Name (Last, First, Middle Initial)

Mailing Address 4032 CAMP SHORE DRIVE

City SEBRING State FL Zip Code 33875-6255

FEC ID number of contributing federal political committee. **C**

Name of Employer CARDIOLOGIST Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83647

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN DAVIDSON
Full Name (Last, First, Middle Initial)

Mailing Address 6363 CHRISTIE AVE #1016

City EMERYVILLE State CA Zip Code 94608-1920

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11.55554

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WARREN DAVIDSON
Full Name (Last, First, Middle Initial)

Mailing Address 6363 CHRISTIE AVE #1016

City EMERYVILLE State CA Zip Code 94608-1920

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation DENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.59908

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 139 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BECKY DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 19827 CYPRESS CHURCH RD.
City CYPRESS State TX Zip Code 77433-1479
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation RANCHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79058
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA11.54492
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57485
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 140 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA11.59998
Amount of Each Receipt this Period 20.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA11.62490
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 03 / 2015
Transaction ID : SA11.63073
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 141 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA11.64332
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 06 / 29 / 2015
Transaction ID : SA11.77383
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLYN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 4604 GARDINER DR
City COLUMBUS State GA Zip Code 31907-3440
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED IRS Occupation SECRETARY RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.78833
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 143 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.54114

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.59536

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **775.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63317

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 144 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.65478

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2015

Transaction ID : SA11.79521

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MAE DAWSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 157

City FULTON	State TX	Zip Code 78358-0157
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE BAG LADY	Occupation GARBAGE SERVICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85655

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 145 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. PHILIP M DEANS

Mailing Address 5122 COLONIAL DRIVE

City PEARLAND State TX Zip Code 77584-7077

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation CONSULTANT CIVIL/SPACE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015
Transaction ID : SA11.84421

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT J. DELLENBACK

Mailing Address P.O. BOX 8610

City JACKSON State WY Zip Code 83002-8610

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.74382

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ARTHUR J. DELUCA

Mailing Address 6 SANDWEDGE DR./

City HENDERSON State NV Zip Code 89074-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54428

Amount of Each Receipt this Period
 30.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	780.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 146 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ARTHUR J. DELUCA
Full Name (Last, First, Middle Initial)

Mailing Address 6 SANDWEDGE DR./

City HENDERSON State NV Zip Code 89074-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.55055

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ARTHUR J. DELUCA
Full Name (Last, First, Middle Initial)

Mailing Address 6 SANDWEDGE DR./

City HENDERSON State NV Zip Code 89074-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015

Transaction ID : SA11.55975

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ARTHUR J. DELUCA
Full Name (Last, First, Middle Initial)

Mailing Address 6 SANDWEDGE DR./

City HENDERSON State NV Zip Code 89074-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015

Transaction ID : SA11.63998

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 147 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ARTHUR J. DELUCA
Full Name (Last, First, Middle Initial)

Mailing Address 6 SANDWEDGE DR./

City HENDERSON State NV Zip Code 89074-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2015
Transaction ID : SA11.76430

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT DEMPSEY
Full Name (Last, First, Middle Initial)

Mailing Address 80 EAST MORRIS ST

City PHILADELPHIA State PA Zip Code 19148-1411

FEC ID number of contributing federal political committee. **C**

Name of Employer CCT Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54447

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT DEMPSEY
Full Name (Last, First, Middle Initial)

Mailing Address 80 EAST MORRIS ST

City PHILADELPHIA State PA Zip Code 19148-1411

FEC ID number of contributing federal political committee. **C**

Name of Employer CCT Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.59025

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	635.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 148 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT DEMPSEY
Full Name (Last, First, Middle Initial)

Mailing Address 80 EAST MORRIS ST

City PHILADELPHIA State PA Zip Code 19148-1411

FEC ID number of contributing federal political committee. **C**

Name of Employer CCT Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.63613

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT DEMSKI
Full Name (Last, First, Middle Initial)

Mailing Address 2020 PERSIMMON HILL LN

City LAMPE State MO Zip Code 65681-7395

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.54442

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BEVERLEY DERR
Full Name (Last, First, Middle Initial)

Mailing Address 39 BITLER ROAD

City MILLVILLE State PA Zip Code 17846-9265

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.85671

Amount of Each Receipt this Period 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 149 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST
City CINCINNATI State OH Zip Code 45227-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1950.00**

Date of Receipt **02 / 06 / 2015**
Transaction ID : SA11.55708
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST
City CINCINNATI State OH Zip Code 45227-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1950.00**

Date of Receipt **02 / 16 / 2015**
Transaction ID : SA11.56243
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST
City CINCINNATI State OH Zip Code 45227-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1950.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.60514
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 150 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JOYCE DILL

Mailing Address 3725 WEST CENTER ST

City CINCINNATI State OH Zip Code 45227-4446

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA11.62518

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JOYCE DILL

Mailing Address 3725 WEST CENTER ST

City CINCINNATI State OH Zip Code 45227-4446

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : SA11.72141

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. JOYCE DILL

Mailing Address 3725 WEST CENTER ST

City CINCINNATI State OH Zip Code 45227-4446

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11.76588

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 151 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST

City CINCINNATI	State OH	Zip Code 45227-4446
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81328

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST

City CINCINNATI	State OH	Zip Code 45227-4446
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81623

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST

City CINCINNATI	State OH	Zip Code 45227-4446
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2015

Transaction ID : SA11.81967

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 152 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST
City CINCINNATI State OH Zip Code 45227-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1950.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83640
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOYCE DILL
Full Name (Last, First, Middle Initial)
Mailing Address 3725 WEST CENTER ST
City CINCINNATI State OH Zip Code 45227-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1950.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.85034
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARVIN DINVILLE
Full Name (Last, First, Middle Initial)
Mailing Address 12326 44TH ST
City CLEAR LAKE State MN Zip Code 55319-9208
FEC ID number of contributing federal political committee. **C**
Name of Employer XCEL ENERGY Occupation POWER PLANT WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 02 / 02 / 2015
Transaction ID : SA11.65518
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 153 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 05 / 06 / 2015
Transaction ID : SA11.72143
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 05 / 16 / 2015
Transaction ID : SA11.74185
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11.75766
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 154 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 06 / 2015
Transaction ID : SA11.76371
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 13 / 2015
Transaction ID : SA11.76629
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 16 / 2015
Transaction ID : SA11.76971
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 155 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 06 / 29 / 2015
Transaction ID : SA11.77606
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN D. DIXON
Full Name (Last, First, Middle Initial)
Mailing Address 1120 E. MISSION RD.
City FALLBROOK State CA Zip Code 92028-2230
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED TEACHER Occupation RETIRED TEACHER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 610.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.85011
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BUDDY K DODSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 248
City DADEVILLE State MO Zip Code 65635-0248
FEC ID number of contributing federal political committee. **C**
Name of Employer NAN Occupation UNEMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 04 / 2015
Transaction ID : SA11.85325
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 156 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DRUSCILLA DOEHRMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 2165
 City NAPLES State FL Zip Code 34106-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5250.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : SA11.79094
 Amount of Each Receipt this Period **5000.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PHYLLIS DORRICOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 26710 BIRCH HILL WAY
 City LOS ALTOS HILLS State CA Zip Code 94022-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NO ONE Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 13 / 2015**
Transaction ID : SA11.81088
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROSALIE DUNHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 6821 SADDLETREE TRAIL
 City PLANO State TX Zip Code 75023-1349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED 25YRS.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 28 / 2015**
Transaction ID : SA11.54406
 Amount of Each Receipt this Period **25.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **5275.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROSALIE DUNHAM

Mailing Address **6821 SADDLETREE TRAIL**

City **PLANO** State **TX** Zip Code **75023-1349**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED 25YRS.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **02 / 02 / 2015**

Transaction ID : SA11.54655

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROSALIE DUNHAM

Mailing Address **6821 SADDLETREE TRAIL**

City **PLANO** State **TX** Zip Code **75023-1349**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED 25YRS.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **02 / 04 / 2015**

Transaction ID : SA11.55146

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ROSALIE DUNHAM

Mailing Address **6821 SADDLETREE TRAIL**

City **PLANO** State **TX** Zip Code **75023-1349**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED 25YRS.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **02 / 16 / 2015**

Transaction ID : SA11.56295

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ► **100.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 158 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROSALIE DUNHAM
Full Name (Last, First, Middle Initial)
Mailing Address 6821 SADDLETREE TRAIL

City PLANO	State TX	Zip Code 75023-1349
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED 25YRS.
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.58151

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROSALIE DUNHAM
Full Name (Last, First, Middle Initial)
Mailing Address 6821 SADDLETREE TRAIL

City PLANO	State TX	Zip Code 75023-1349
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED 25YRS.
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.65166

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROSALIE DUNHAM
Full Name (Last, First, Middle Initial)
Mailing Address 6821 SADDLETREE TRAIL

City PLANO	State TX	Zip Code 75023-1349
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED 25YRS.
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2015

Transaction ID : SA11.75584

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 159 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROSALIE DUNHAM
Full Name (Last, First, Middle Initial)
Mailing Address 6821 SADDLETREE TRAIL
City PLANO State TX Zip Code 75023-1349
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED 25YRS.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.85705
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH DUNIPACE
Full Name (Last, First, Middle Initial)
Mailing Address 5462 SPINDLE TREE ROAD
City INDIANAPOLIS State IN Zip Code 46268-3936
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.54340
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KENNETH DUNIPACE
Full Name (Last, First, Middle Initial)
Mailing Address 5462 SPINDLE TREE ROAD
City INDIANAPOLIS State IN Zip Code 46268-3936
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58059
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH DUNIPACE
Full Name (Last, First, Middle Initial)
Mailing Address 5462 SPINDLE TREE ROAD
City INDIANAPOLIS State IN Zip Code 46268-3936
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11.62447
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH DUNIPACE
Full Name (Last, First, Middle Initial)
Mailing Address 5462 SPINDLE TREE ROAD
City INDIANAPOLIS State IN Zip Code 46268-3936
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 04 / 10 / 2015
Transaction ID : SA11.80651
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SHELAGH DUNLAP
Full Name (Last, First, Middle Initial)
Mailing Address 13726 HAWKSNEST BAY DR
City CORPUS CHRISTI State TX Zip Code 78418-6332
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 22 / 2015
Transaction ID : SA11.75333
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA Q. DURDEN
Full Name (Last, First, Middle Initial)
Mailing Address 46-411 HULUPALA PLACE

City KANEEOHE	State HI	Zip Code 96744-4232
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation RETIRED SCHOOL TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
MM / DD / YYYY
03 / 06 / 2015
Transaction ID : SA11.57815

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA Q. DURDEN
Full Name (Last, First, Middle Initial)
Mailing Address 46-411 HULUPALA PLACE

City KANEEOHE	State HI	Zip Code 96744-4232
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation RETIRED SCHOOL TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015
Transaction ID : SA11.77496

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BARBARA Q. DURDEN
Full Name (Last, First, Middle Initial)
Mailing Address 46-411 HULUPALA PLACE

City KANEEOHE	State HI	Zip Code 96744-4232
FEC ID number of contributing federal political committee. C		
Name of Employer HOMEMAKER	Occupation RETIRED SCHOOL TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
MM / DD / YYYY
04 / 06 / 2015
Transaction ID : SA11.79975

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 162 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA Q. DURDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 46-411 HULUPALA PLACE
 City KANEEOHE State HI Zip Code 96744-4232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **HOMEMAKER** Occupation: **RETIRED SCHOOL TEACHER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt: **04 / 28 / 2015**
Transaction ID : SA11.84417
 Amount of Each Receipt this Period: **100.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TYLER DURHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 AUBURN RD
 City NOTASULGA State AL Zip Code 36866-2227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **BENNYWHITEHEAD INC.** Occupation: **TRUCK DRIVER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt: **04 / 30 / 2015**
Transaction ID : SA11.85215
 Amount of Each Receipt this Period: **250.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TYLER DURHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 AUBURN RD
 City NOTASULGA State AL Zip Code 36866-2227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: **BENNYWHITEHEAD INC.** Occupation: **TRUCK DRIVER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt: **04 / 30 / 2015**
Transaction ID : SA11.85216
 Amount of Each Receipt this Period: **250.00**
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **600.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 163 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEPHEN DVORCHAK
Full Name (Last, First, Middle Initial)

Mailing Address 2559 MOONLIGHT VALLEY AVE.

City HENDERSON	State NV	Zip Code 89044-1524
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF	Occupation OPERATIONS RESEARCH ANALYST
--------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77247

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. STEPHEN DVORCHAK
Full Name (Last, First, Middle Initial)

Mailing Address 2559 MOONLIGHT VALLEY AVE.

City HENDERSON	State NV	Zip Code 89044-1524
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF	Occupation OPERATIONS RESEARCH ANALYST
--------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83632

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. STEPHEN DVORCHAK
Full Name (Last, First, Middle Initial)

Mailing Address 2559 MOONLIGHT VALLEY AVE.

City HENDERSON	State NV	Zip Code 89044-1524
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF	Occupation OPERATIONS RESEARCH ANALYST
--------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85710

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 164 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA11.57116
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58158
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 03 / 13 / 2015
Transaction ID : SA11.58524
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 165 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.59906
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61540
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 02 / 16 / 2015
Transaction ID : SA11.61939
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 166 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11.64896
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 04 / 04 / 2015
Transaction ID : SA11.79375
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 04 / 11 / 2015
Transaction ID : SA11.80703
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 167 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 04 / 25 / 2015
Transaction ID : SA11.81929
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84181
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN EATON
Full Name (Last, First, Middle Initial)
Mailing Address 3725 S. POPLAR ST.
City DENVER State CO Zip Code 80237-1331
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1405.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.85716
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 168 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 28 / 2015**
Transaction ID : SA11.54416
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **02 / 02 / 2015**
Transaction ID : SA11.54605
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 05 / 2015**
Transaction ID : SA11.57513
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **45.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 169 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2015
Transaction ID : SA11.61514
Amount of Each Receipt this Period
10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 01 / 2015
Transaction ID : SA11.62942
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015
Transaction ID : SA11.64600
Amount of Each Receipt this Period
10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2015
Transaction ID : SA11.65131
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 27 / 2015
Transaction ID : SA11.75586
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 28 / 2015
Transaction ID : SA11.75662
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 171 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 15 / 2015
Transaction ID : SA11.81171
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUTH ECKERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 3528 ATWOODAVE.
City MADISON State WI Zip Code 53714-2887
FEC ID number of contributing federal political committee. **C**
Name of Employer TEACHER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83300
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID EGAN
Full Name (Last, First, Middle Initial)
Mailing Address 10 CYPRESS AVENUE
City KENTFIELD State CA Zip Code 94904-1018
FEC ID number of contributing federal political committee. **C**
Name of Employer COLDWELL BANKER Occupation REAL ESTATE BROKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60413
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 172 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DAVID EGAN

Mailing Address 10 CYPRESS AVENUE

City State Zip Code
KENTFIELD CA 94904-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COLDWELL BANKER REAL ESTATE BROKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 16 / 2015
Transaction ID : SA11.76873

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DONALD EICHSTAEDT

Mailing Address 18222 REDWOOD AVE.

City State Zip Code
LATHRUP VILLAGE MI 48076-7005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : SA11.83575

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. PERRY EISENHOWER

Mailing Address 2400 GLACIER DRIVE

City State Zip Code
PAPILLION NE 68046-3255

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CMSGT RETIRED USAF CMSGT RETIRED USAF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015
Transaction ID : SA11.65180

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 173 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PERRY EISENHOWER
Full Name (Last, First, Middle Initial)
Mailing Address 2400 GLACIER DRIVE

City PAPILLION	State NE	Zip Code 68046-3255
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CMSGT RETIRED USAF	Occupation CMSGT RETIRED USAF
----------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76330

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PERRY EISENHOWER
Full Name (Last, First, Middle Initial)
Mailing Address 2400 GLACIER DRIVE

City PAPILLION	State NE	Zip Code 68046-3255
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CMSGT RETIRED USAF	Occupation CMSGT RETIRED USAF
----------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78280

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PERRY EISENHOWER
Full Name (Last, First, Middle Initial)
Mailing Address 2400 GLACIER DRIVE

City PAPILLION	State NE	Zip Code 68046-3255
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CMSGT RETIRED USAF	Occupation CMSGT RETIRED USAF
----------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78985

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 174 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PERRY EISENHOWER
Full Name (Last, First, Middle Initial)
Mailing Address 2400 GLACIER DRIVE
City PAPHILLION State NE Zip Code 68046-3255
FEC ID number of contributing federal political committee. **C**
Name of Employer CMSGT RETIRED USAF Occupation CMSGT RETIRED USAF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84192
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PERRY EISENHOWER
Full Name (Last, First, Middle Initial)
Mailing Address 2400 GLACIER DRIVE
City PAPHILLION State NE Zip Code 68046-3255
FEC ID number of contributing federal political committee. **C**
Name of Employer CMSGT RETIRED USAF Occupation CMSGT RETIRED USAF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.85726
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONALD G ELLIOTT
Full Name (Last, First, Middle Initial)
Mailing Address 101 CASTLE GARDENS DR.
City CASTLE HILLS State TX Zip Code 78213-1856
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 03 / 30 / 2015
Transaction ID : SA11.59471
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 175 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DONALD G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS State TX Zip Code 78213-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 01 / 01 / 2015
Transaction ID : SA11.59512

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DONALD G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS State TX Zip Code 78213-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 01 / 19 / 2015
Transaction ID : SA11.59571

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONALD G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 101 CASTLE GARDENS DR.

City CASTLE HILLS State TX Zip Code 78213-1856

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1825.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84425

Amount of Each Receipt this Period 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 176 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)
Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG	State FL	Zip Code 32068-3243
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.00

Date of Receipt
03 / 14 / 2015
Transaction ID : SA11.58626

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)
Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG	State FL	Zip Code 32068-3243
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.00

Date of Receipt
03 / 15 / 2015
Transaction ID : SA11.58689

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)
Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG	State FL	Zip Code 32068-3243
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
615.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA11.58856

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 177 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11.62439

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA11.62693

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt 05 / 06 / 2015
Transaction ID : SA11.72155

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 178 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015

Transaction ID : SA11.77132

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2015

Transaction ID : SA11.81619

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ORVILLE G ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 4421 SADDLEHORN TRAIL

City MIDDLEBURG State FL Zip Code 32068-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015

Transaction ID : SA11.84163

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 180 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KATHY EMERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7893 STYLUS DRIVE
 City SAN DIEGO State CA Zip Code 92108-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNEMPLOYED Occupation ESCROW OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.63360
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KATHY EMERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7893 STYLUS DRIVE
 City SAN DIEGO State CA Zip Code 92108-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNEMPLOYED Occupation ESCROW OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2015
Transaction ID : SA11.79558
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KATHY EMERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7893 STYLUS DRIVE
 City SAN DIEGO State CA Zip Code 92108-2620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNEMPLOYED Occupation ESCROW OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.82797
 Amount of Each Receipt this Period 10.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 181 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KATHY EMERSON
Full Name (Last, First, Middle Initial)

Mailing Address 7893 STYLUS DRIVE

City SAN DIEGO	State CA	Zip Code 92108-2620
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer UNEMPLOYED	Occupation ESCROW OFFICER
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.85737

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54752

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.56791

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 182 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57698

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2015

Transaction ID : SA11.57974

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.59642

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 183 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59770

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61595

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN ENEY
Full Name (Last, First, Middle Initial)

Mailing Address 12116 DOUBLE TREE LANE

City LUSBY	State MD	Zip Code 20657-3647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WAS U.S. NAVY	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.62023

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 186 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GERALDINE EVANS
Full Name (Last, First, Middle Initial)
Mailing Address 7471 MUCHMORE CLOSE

City CINCINNATI	State OH	Zip Code 45243-4149
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59899

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GERALDINE EVANS
Full Name (Last, First, Middle Initial)
Mailing Address 7471 MUCHMORE CLOSE

City CINCINNATI	State OH	Zip Code 45243-4149
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61000

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GERALDINE EVANS
Full Name (Last, First, Middle Initial)
Mailing Address 7471 MUCHMORE CLOSE

City CINCINNATI	State OH	Zip Code 45243-4149
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	26	/	2015

Transaction ID : SA11.82221

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 187 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.55088
Amount of Each Receipt this Period 15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 02 / 15 / 2015
Transaction ID : SA11.56180
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 03 / 04 / 2015
Transaction ID : SA11.57429
Amount of Each Receipt this Period 15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 188 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 03 / 22 / 2015
Transaction ID : SA11.59342
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61633
Amount of Each Receipt this Period 15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 286.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA11.62672
Amount of Each Receipt this Period 15.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 40.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 189 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)

Mailing Address 4330 JANA VISTA RD

City EL SOBRANTE State CA Zip Code 94803-3018

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
03 / 09 / 2015
Transaction ID : SA11.63928

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)

Mailing Address 4330 JANA VISTA RD

City EL SOBRANTE State CA Zip Code 94803-3018

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
03 / 23 / 2015
Transaction ID : SA11.65289

Amount of Each Receipt this Period
18.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)

Mailing Address 4330 JANA VISTA RD

City EL SOBRANTE State CA Zip Code 94803-3018

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt
03 / 31 / 2015
Transaction ID : SA11.65429

Amount of Each Receipt this Period
18.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 190 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **286.00**

Date of Receipt **05 / 23 / 2015**
Transaction ID : SA11.75475
Amount of Each Receipt this Period **15.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **286.00**

Date of Receipt **04 / 13 / 2015**
Transaction ID : SA11.81009
Amount of Each Receipt this Period **20.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID FAFARMAN
Full Name (Last, First, Middle Initial)
Mailing Address 4330 JANA VISTA RD
City EL SOBRANTE State CA Zip Code 94803-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RET.
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **286.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81899
Amount of Each Receipt this Period **20.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **55.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 191 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. SALLYANN FAMA

Mailing Address 1361 EAST 56TH STREET

City State Zip Code
CHICAGO IL 60637-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11.56346

Amount of Each Receipt this Period

 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. SALLYANN FAMA

Mailing Address 1361 EAST 56TH STREET

City State Zip Code
CHICAGO IL 60637-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 11 / 2015
Transaction ID : SA11.61721

Amount of Each Receipt this Period

 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. SALLYANN FAMA

Mailing Address 1361 EAST 56TH STREET

City State Zip Code
CHICAGO IL 60637-1754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.77971

Amount of Each Receipt this Period

 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶
 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 192 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GLORIA FEAR
Full Name (Last, First, Middle Initial)
Mailing Address 6899 KASSONTA DR
City JAMESVILLE State NY Zip Code 13078-9670
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **01 / 31 / 2015**
Transaction ID : SA11.60074
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GLORIA FEAR
Full Name (Last, First, Middle Initial)
Mailing Address 6899 KASSONTA DR
City JAMESVILLE State NY Zip Code 13078-9670
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **03 / 22 / 2015**
Transaction ID : SA11.65268
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLORIA FEAR
Full Name (Last, First, Middle Initial)
Mailing Address 6899 KASSONTA DR
City JAMESVILLE State NY Zip Code 13078-9670
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : SA11.79043
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **100.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 193 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. GLORIA FEAR

Mailing Address **6899 KASSONTA DR**

City JAMESVILLE	State NY	Zip Code 13078-9670
---------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83219

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JUDY FIGGE

Mailing Address **4432 STATE HIGHWAY 25 SE**

City BUFFALO	State MN	Zip Code 55313-8002
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PRAIRIE RIVER HOME CARE INC	Occupation CEO
--------------------------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72169

Amount of Each Receipt this Period

50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. JUDY FIGGE

Mailing Address **4432 STATE HIGHWAY 25 SE**

City BUFFALO	State MN	Zip Code 55313-8002
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PRAIRIE RIVER HOME CARE INC	Occupation CEO
--------------------------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SA11.85064

Amount of Each Receipt this Period

250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 194 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. H DUSTIN FILLMORE
Full Name (Last, First, Middle Initial)
Mailing Address 2712 MANORWOOD TRAIL

City FORT WORTH	State TX	Zip Code 76109-9589
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A RETIRED	Occupation N/A RETIRED
---------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59909

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. H DUSTIN FILLMORE
Full Name (Last, First, Middle Initial)
Mailing Address 2712 MANORWOOD TRAIL

City FORT WORTH	State TX	Zip Code 76109-9589
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A RETIRED	Occupation N/A RETIRED
---------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60435

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. H DUSTIN FILLMORE
Full Name (Last, First, Middle Initial)
Mailing Address 2712 MANORWOOD TRAIL

City FORT WORTH	State TX	Zip Code 76109-9589
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A RETIRED	Occupation N/A RETIRED
---------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83571

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DANIEL FINNANE

Mailing Address 46300 AMETHYST DR

City State Zip Code
INDIAN WELLS CA 92210-8611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 08 / 2015
Transaction ID : SA11.58017

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DANIEL FINNANE

Mailing Address 46300 AMETHYST DR

City State Zip Code
INDIAN WELLS CA 92210-8611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2015
Transaction ID : SA11.74967

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. CYNTHIA KAY FISHER

Mailing Address 315 ROCK ST APT 1203
1203

City State Zip Code
LITTLE ROCK AR 72202-5528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2015
Transaction ID : SA11.57590

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 198 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CYNTHIA KAY FISHER
Full Name (Last, First, Middle Initial)

Mailing Address 315 ROCK ST APT 1203
1203

City LITTLE ROCK State AR Zip Code 72202-5528

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2015

Transaction ID : SA11.62827

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN FISKE
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S PINE ISLAND RD

City PLANTATION State FL Zip Code 33324-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer FISKE & COMPANY Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

Transaction ID : SA11.59010

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN FISKE
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S PINE ISLAND RD

City PLANTATION State FL Zip Code 33324-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer FISKE & COMPANY Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2015

Transaction ID : SA11.61077

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 199 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN FISKE
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S PINE ISLAND RD

City PLANTATION State FL Zip Code 33324-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer FISKE & COMPANY Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.63371

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN FISKE
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S PINE ISLAND RD

City PLANTATION State FL Zip Code 33324-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer FISKE & COMPANY Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83439

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address 10961 ALTA VIEW DRIVE

City STUDIO CITY State CA Zip Code 91604-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation WRITER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015
Transaction ID : SA11.74186

Amount of Each Receipt this Period
 5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 200 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN FLEMING
Full Name (Last, First, Middle Initial)
Mailing Address 10961 ALTA VIEW DRIVE
City STUDIO CITY State CA Zip Code 91604-3904
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation WRITER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt **04 / 12 / 2015**
Transaction ID : SA11.80823
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN FLEMING
Full Name (Last, First, Middle Initial)
Mailing Address 10961 ALTA VIEW DRIVE
City STUDIO CITY State CA Zip Code 91604-3904
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation WRITER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81762
Amount of Each Receipt this Period **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEAN FLEMING
Full Name (Last, First, Middle Initial)
Mailing Address 10961 ALTA VIEW DRIVE
City STUDIO CITY State CA Zip Code 91604-3904
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation WRITER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt **05 / 04 / 2015**
Transaction ID : SA11.85328
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	25.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 202 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARILYN FLORO
Full Name (Last, First, Middle Initial)
Marilyn Floro
Mailing Address 4176 ENGLISH HOLLY CIRCLE
City RICHMOND State VA Zip Code 23294-5933
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED USAF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 03 / 17 / 2015
Transaction ID : SA11.65025
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARILYN FLORO
Full Name (Last, First, Middle Initial)
Marilyn Floro
Mailing Address 4176 ENGLISH HOLLY CIRCLE
City RICHMOND State VA Zip Code 23294-5933
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED USAF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 05 / 06 / 2015
Transaction ID : SA11.72175
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARILYN FLORO
Full Name (Last, First, Middle Initial)
Marilyn Floro
Mailing Address 4176 ENGLISH HOLLY CIRCLE
City RICHMOND State VA Zip Code 23294-5933
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED USAF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 05 / 07 / 2015
Transaction ID : SA11.72762
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 204 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM THOMAS FLYNN
Full Name (Last, First, Middle Initial)
Mailing Address 55-05 WOODSIDE AVE.
City WOODSIDE State NY Zip Code 11377-3361
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation CABLE TV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **02 / 19 / 2015**
Transaction ID : SA11.65450
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM THOMAS FLYNN
Full Name (Last, First, Middle Initial)
Mailing Address 55-05 WOODSIDE AVE.
City WOODSIDE State NY Zip Code 11377-3361
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation CABLE TV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **05 / 27 / 2015**
Transaction ID : SA11.75588
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM THOMAS FLYNN
Full Name (Last, First, Middle Initial)
Mailing Address 55-05 WOODSIDE AVE.
City WOODSIDE State NY Zip Code 11377-3361
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation CABLE TV
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **04 / 07 / 2015**
Transaction ID : SA11.80303
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 205 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.54540

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63564

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2015

Transaction ID : SA11.74238

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 206 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2015

Transaction ID : SA11.77348

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80601

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. CARL FOSTER

Mailing Address 6970 N LEONARDO DA VINCI WAY

City TUCSON	State AZ	Zip Code 85704-3023
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83355

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 207 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ELEANOR FOX

Mailing Address 13572 PINE VILLA LANE

City	State	Zip Code
FORT MYERS	FL	33912-1614

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81341

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LESTER FRANKENTHAL

Mailing Address 1550 BUTTONBUSH CIRCLE

City	State	Zip Code
PALM CITY	FL	34990-8082

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WILLIAM BLAIR	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83637

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LESTER FRANKENTHAL

Mailing Address 1550 BUTTONBUSH CIRCLE

City	State	Zip Code
PALM CITY	FL	34990-8082

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
WILLIAM BLAIR	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : SA11.85217

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 208 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARRY FRIEDBERG
Full Name (Last, First, Middle Initial)

Mailing Address 134 E 71ST ST

City THE NEW YORK State NY Zip Code 10021-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer FRIEDBERGMILSTEIN Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2015
Transaction ID : SA11.81970

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD FROST
Full Name (Last, First, Middle Initial)

Mailing Address 30 PEDDRICK RD

City WAYNE State PA Zip Code 19087-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer EASTERN UNIVERSITY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.64025

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD FROST
Full Name (Last, First, Middle Initial)

Mailing Address 30 PEDDRICK RD

City WAYNE State PA Zip Code 19087-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer EASTERN UNIVERSITY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015
Transaction ID : SA11.64360

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 209 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GAY GAINES
Full Name (Last, First, Middle Initial)
Mailing Address 2 N. BREAKERS ROW
City PALM BEACH State FL Zip Code 33480-4040
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **750.00**

Date of Receipt **05 / 20 / 2015**
Transaction ID : SA11.74436
Amount of Each Receipt this Period **500.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GAY GAINES
Full Name (Last, First, Middle Initial)
Mailing Address 2 N. BREAKERS ROW
City PALM BEACH State FL Zip Code 33480-4040
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **750.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81969
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KENNETH GAMBLE
Full Name (Last, First, Middle Initial)
Mailing Address 175 HUGUENOT ST
City NEW ROCHELLE State NY Zip Code 10801-7761
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation INSURANCE BROKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 21 / 2015**
Transaction ID : SA11.74986
Amount of Each Receipt this Period **500.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 210 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54380

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54430

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11.56720

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 211 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57801

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61460

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2015

Transaction ID : SA11.65496

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 212 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : SA11.72771

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.76933

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GASSER
Full Name (Last, First, Middle Initial)
Mailing Address 5595 LAWTON AVE

City OAKLAND	State CA	Zip Code 94618-1508
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78768

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 213 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GASSER
Full Name (Last, First, Middle Initial)

Mailing Address 5595 LAWTON AVE

City OAKLAND State CA Zip Code 94618-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer ADOLPH GASSER INC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2015

Transaction ID : SA11.81482

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES GEDDES
Full Name (Last, First, Middle Initial)

Mailing Address 6670 LAMBERT RANCH CROSSING

City SEDALIA State CO Zip Code 80135-8865

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2015

Transaction ID : SA11.73053

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES GEDDES
Full Name (Last, First, Middle Initial)

Mailing Address 6670 LAMBERT RANCH CROSSING

City SEDALIA State CO Zip Code 80135-8865

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SA11.76299

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 214 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT GIERE
Full Name (Last, First, Middle Initial)
Mailing Address 15805 PAUMA VALLEY DR

City PAUMA VALLEY	State CA	Zip Code 92061-1612
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED PERIODONTIST
--------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.54105

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT GIERE
Full Name (Last, First, Middle Initial)
Mailing Address 15805 PAUMA VALLEY DR

City PAUMA VALLEY	State CA	Zip Code 92061-1612
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED PERIODONTIST
--------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.55365

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT GIERE
Full Name (Last, First, Middle Initial)
Mailing Address 15805 PAUMA VALLEY DR

City PAUMA VALLEY	State CA	Zip Code 92061-1612
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED PERIODONTIST
--------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57464

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 216 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT GIERE

Mailing Address 15805 PAUMA VALLEY DR

City PAUMA VALLEY State CA Zip Code 92061-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RETIRED PERIODONTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
05 / 05 / 2015
Transaction ID : SA11.85835

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DENNIS GILSTAD

Mailing Address 7255 EAST BALDWIN RIAD

City GRAND BLANC State MI Zip Code 48439-9507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA11.64920

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ANN GLENDINNING

Mailing Address 318 S. BEACH RD.

City HOBE SOUND State FL Zip Code 33455-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED 80 YRS. OF AGE HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
02 / 16 / 2015
Transaction ID : SA11.65552

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 310.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANN GLENDINNING
Full Name (Last, First, Middle Initial)
Mailing Address 318 S. BEACH RD.
City HOBE SOUND State FL Zip Code 33455-2605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED 80 YRS. OF AGE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74444
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ANN GLENDINNING
Full Name (Last, First, Middle Initial)
Mailing Address 318 S. BEACH RD.
City HOBE SOUND State FL Zip Code 33455-2605
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED 80 YRS. OF AGE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 04 / 16 / 2015
Transaction ID : SA11.81329
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CAROL GODSAVE
Full Name (Last, First, Middle Initial)
Mailing Address 2131 ARDIS DRIVE
City SAN JOSE State CA Zip Code 95125-2604
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11.59006
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... 250.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 218 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CAROL GODSAVE
Full Name (Last, First, Middle Initial)
Mailing Address 2131 ARDIS DRIVE
City SAN JOSE State CA Zip Code 95125-2604
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 22 / 2015
Transaction ID : SA11.81635
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARK GODSEY
Full Name (Last, First, Middle Initial)
Mailing Address 3701 S ORANGE CIR
City BROKEN ARROW State OK Zip Code 74011-1103
FEC ID number of contributing federal political committee. **C**
Name of Employer EAGLE RIVER ENERGY CORPORATION Occupation PRESIDENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74445
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ULYSSES GOODWYN
Full Name (Last, First, Middle Initial)
Mailing Address 508 CARNOUSTIE
City SHOAL CREEK State AL Zip Code 35242-5956
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 285.00

Date of Receipt 02 / 18 / 2015
Transaction ID : SA11.56575
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 219 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELIZABETH GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 705 MORRISON LANE

City LAURINBURG State NC Zip Code 28352-4220

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11.83642

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City CENTERVILLE State OH Zip Code 45459-4844

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11.64199

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City CENTERVILLE State OH Zip Code 45459-4844

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.71001

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 220 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City: CENTERVILLE State: OH Zip Code: 45459-4844

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 04 / 06 / 2015
Transaction ID : SA11.79816

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City: CENTERVILLE State: OH Zip Code: 45459-4844

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 04 / 15 / 2015
Transaction ID : SA11.81178

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City: CENTERVILLE State: OH Zip Code: 45459-4844

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 04 / 23 / 2015
Transaction ID : SA11.81708

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 221 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GRAMANN
Full Name (Last, First, Middle Initial)

Mailing Address 7132 FALLEN OAK TRACE

City: CENTERVILLE State: OH Zip Code: 45459-4844

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: PHARMACIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: 210.00

Date of Receipt: 04 / 27 / 2015
Transaction ID : SA11.83131

Amount of Each Receipt this Period: 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WINIFRED GRAY
Full Name (Last, First, Middle Initial)

Mailing Address 195 LARCH ROW

City: WENHAM State: MA Zip Code: 01984-1608

FEC ID number of contributing federal political committee: **C**

Name of Employer: SELF Occupation: PORTRAIT ARTIST REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 06 / 30 / 2015
Transaction ID : SA11.77704

Amount of Each Receipt this Period: 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WINIFRED GRAY
Full Name (Last, First, Middle Initial)

Mailing Address 195 LARCH ROW

City: WENHAM State: MA Zip Code: 01984-1608

FEC ID number of contributing federal political committee: **C**

Name of Employer: SELF Occupation: PORTRAIT ARTIST REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: 600.00

Date of Receipt: 04 / 06 / 2015
Transaction ID : SA11.79976

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 222 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WINIFRED GRAY
Full Name (Last, First, Middle Initial)

Mailing Address 195 LARCH ROW

City WENHAM State MA Zip Code 01984-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation PORTRAIT ARTIST REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83568

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 7181 E CAMELBACK RD. STE 906

City SCOTTSDALE State AZ Zip Code 85251-8214

FEC ID number of contributing federal political committee. **C**

Name of Employer ME Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.56001

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GEORGE GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 7181 E CAMELBACK RD. STE 906

City SCOTTSDALE State AZ Zip Code 85251-8214

FEC ID number of contributing federal political committee. **C**

Name of Employer ME Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.59745

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 223 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GEORGE GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 7181 E CAMELBACK RD. STE 906

City SCOTTSDALE	State AZ	Zip Code 85251-8214
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ME	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61664

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
10.00											

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 7181 E CAMELBACK RD. STE 906

City SCOTTSDALE	State AZ	Zip Code 85251-8214
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ME	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83427

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	5	0
50.00											

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEANNETTE GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 702 DORADO COURT

City BRANDON	State FL	Zip Code 33511-5860
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT APPLICABLE	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.63996

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	2	5
25.00											

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	85.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 224 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FREDERICK GREGORY
Full Name (Last, First, Middle Initial)
Mailing Address 83 COOK AVE

City YONKERS	State NY	Zip Code 10701-6339
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer US POSTAL SERVICE RETIRED	Occupation MAILHANDLER RETIRED
-----------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.55387

Amount of Each Receipt this Period

15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FREDERICK GREGORY
Full Name (Last, First, Middle Initial)
Mailing Address 83 COOK AVE

City YONKERS	State NY	Zip Code 10701-6339
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer US POSTAL SERVICE RETIRED	Occupation MAILHANDLER RETIRED
-----------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57531

Amount of Each Receipt this Period

15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FREDERICK GREGORY
Full Name (Last, First, Middle Initial)
Mailing Address 83 COOK AVE

City YONKERS	State NY	Zip Code 10701-6339
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer US POSTAL SERVICE RETIRED	Occupation MAILHANDLER RETIRED
-----------------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61054

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 225 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SALLY GRELE
Full Name (Last, First, Middle Initial)
Mailing Address 1620 PUGET ST NE

City OLYMPIA	State WA	Zip Code 98506-3361
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation 30 YR RETIRED HUMAN RESOURCES/20 SM
-------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2015

Transaction ID : SA11.73503

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SALLY GRELE
Full Name (Last, First, Middle Initial)
Mailing Address 1620 PUGET ST NE

City OLYMPIA	State WA	Zip Code 98506-3361
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation 30 YR RETIRED HUMAN RESOURCES/20 SM
-------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.74998

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SALLY GRELE
Full Name (Last, First, Middle Initial)
Mailing Address 1620 PUGET ST NE

City OLYMPIA	State WA	Zip Code 98506-3361
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation 30 YR RETIRED HUMAN RESOURCES/20 SM
-------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78165

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 226 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SALLY GRELE
Full Name (Last, First, Middle Initial)
Mailing Address 1620 PUGET ST NE

City OLYMPIA	State WA	Zip Code 98506-3361
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation 30 YR RETIRED HUMAN RESOURCES/20 SM
-------------------------	---------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SA11.85026

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN GRISHAM
Full Name (Last, First, Middle Initial)
Mailing Address 105 MILL CREEK DRIVE

City BOARDMAN	State OH	Zip Code 44512-1402
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation MINING EXECUTIVE
-----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64916

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN GRISHAM
Full Name (Last, First, Middle Initial)
Mailing Address 105 MILL CREEK DRIVE

City BOARDMAN	State OH	Zip Code 44512-1402
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation MINING EXECUTIVE
-----------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79402

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 227 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN GRISHAM
Full Name (Last, First, Middle Initial)

Mailing Address 105 MILL CREEK DRIVE

City BOARDMAN State OH Zip Code 44512-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation MINING EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83576

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GORDON GUTHMILLER
Full Name (Last, First, Middle Initial)

Mailing Address 460 CREEKSIDE LN

City MORGAN HILL State CA Zip Code 95037-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11.76232

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NINA GUTHRIE
Full Name (Last, First, Middle Initial)

Mailing Address 29676 RAWHIDE CT

City ELIZABETH State CO Zip Code 80107-6605

FEC ID number of contributing federal political committee. **C**

Name of Employer --- Occupation SENIOR RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71018

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 228 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NINA GUTHRIE
Full Name (Last, First, Middle Initial)
Mailing Address 29676 RAWHIDE CT

City ELIZABETH	State CO	Zip Code 80107-6605
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ---	Occupation SENIOR RETIRED
-------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74457

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NINA GUTHRIE
Full Name (Last, First, Middle Initial)
Mailing Address 29676 RAWHIDE CT

City ELIZABETH	State CO	Zip Code 80107-6605
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ---	Occupation SENIOR RETIRED
-------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2015

Transaction ID : SA11.76448

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NINA GUTHRIE
Full Name (Last, First, Middle Initial)
Mailing Address 29676 RAWHIDE CT

City ELIZABETH	State CO	Zip Code 80107-6605
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ---	Occupation SENIOR RETIRED
-------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

Transaction ID : SA11.85248

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 231 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GLEN HAAS
Full Name (Last, First, Middle Initial)

Mailing Address 880 OPEN SKY COURT

City ALLEN State TX Zip Code 75013-5533

FEC ID number of contributing federal political committee. **C**

Name of Employer ARAGIO SOLUTIONS Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84364

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RONALD HADDOX
Full Name (Last, First, Middle Initial)

Mailing Address 1215 N PRUETT

City BAYTOWN State TX Zip Code 77520-2816

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83646

Amount of Each Receipt this Period 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD HALL
Full Name (Last, First, Middle Initial)

Mailing Address 5144 SANTA CRUZ LANE

City JACKSONVILLE State FL Zip Code 32210-7438

FEC ID number of contributing federal political committee. **C**

Name of Employer US NAVY Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71031

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 310.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 232 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.54532

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54761

Amount of Each Receipt this Period

15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57745

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 233 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SA11.62632

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.63013

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SA11.65225

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 234 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 / /
Transaction ID : SA11.65440

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 / /
Transaction ID : SA11.74083

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 / /
Transaction ID : SA11.76231

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 235 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77712

Amount of Each Receipt this Period

420.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 11 CORAL DRIVE

City PITTSBURGH	State PA	Zip Code 15238-2605
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLEGHENY COUNTY	Occupation NETWORK ADMINISTRATOR
--------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83516

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 7143 S. STADIUM WAY

City GILBERT	State AZ	Zip Code 85298-9127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DEVICE ENGINEERING, INC.	Occupation ENGINEER
----------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : SA11.75671

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 236 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 7143 S. STADIUM WAY

City GILBERT	State AZ	Zip Code 85298-9127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DEVICE ENGINEERING, INC.	Occupation ENGINEER
----------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77866

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 7143 S. STADIUM WAY

City GILBERT	State AZ	Zip Code 85298-9127
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DEVICE ENGINEERING, INC.	Occupation ENGINEER
----------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79222

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LYNETTE HANSON-JACQUES
Full Name (Last, First, Middle Initial)

Mailing Address 342 WEKIU PLACE

City LAHAINA	State HI	Zip Code 96761-2914
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54750

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	▶	135.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 237 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LYNETTE HANSON-JACQUES
Full Name (Last, First, Middle Initial)
Mailing Address 342 WEKIU PLACE

City LAHAINA	State HI	Zip Code 96761-2914
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60252

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LYNETTE HANSON-JACQUES
Full Name (Last, First, Middle Initial)
Mailing Address 342 WEKIU PLACE

City LAHAINA	State HI	Zip Code 96761-2914
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61538

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.

City YUBA CITY	State CA	Zip Code 95993-8622
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54399

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.
City YUBA CITY State CA Zip Code 95993-8622
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 02 / 2015
Transaction ID : SA11.63012
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.
City YUBA CITY State CA Zip Code 95993-8622
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.63599
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.
City YUBA CITY State CA Zip Code 95993-8622
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74469
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 239 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.
City YUBA CITY State CA Zip Code 95993-8622
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : SA11.79017
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALTER HARTSTRA
Full Name (Last, First, Middle Initial)
Mailing Address 3475 FRANKLIN RD.
City YUBA CITY State CA Zip Code 95993-8622
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11.84339
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR. N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer CAMP FIRE GULF WIND, INC. Occupation 850-478-7919
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **350.00**

Date of Receipt **03 / 13 / 2015**
Transaction ID : SA11.58487
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **125.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 240 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
03 / 13 / 2015
Transaction ID : SA11.58488
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
02 / 04 / 2015
Transaction ID : SA11.60289
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
05 / 06 / 2015
Transaction ID : SA11.72241
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 241 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2015
Transaction ID : SA11.73069
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
04 / 22 / 2015
Transaction ID : SA11.81563
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2015
Transaction ID : SA11.84747
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 242 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARIE HAVEN
Full Name (Last, First, Middle Initial)
Mailing Address 9060 ASHVILLE DR.
N/A
City PENSACOLA State FL Zip Code 32514-5691
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
CAMP FIRE GULF WIND, INC. 850-478-7919
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt
04 / 29 / 2015
Transaction ID : SA11.84962
Amount of Each Receipt this Period
50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANA HAWTHORNE
Full Name (Last, First, Middle Initial)
Mailing Address 1616 GLENBROOK COURT
City COLUMBIA State MO Zip Code 65203-5345
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NONE RETIRED
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
375.00

Date of Receipt
03 / 19 / 2015
Transaction ID : SA11.65157
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANA HAWTHORNE
Full Name (Last, First, Middle Initial)
Mailing Address 1616 GLENBROOK COURT
City COLUMBIA State MO Zip Code 65203-5345
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
NONE RETIRED
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
375.00

Date of Receipt
05 / 20 / 2015
Transaction ID : SA11.74472
Amount of Each Receipt this Period
100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 243 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANA HAWTHORNE
Full Name (Last, First, Middle Initial)

Mailing Address 1616 GLENBROOK COURT

City COLUMBIA State MO Zip Code 65203-5345

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : **SA11.79069**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANA HAWTHORNE
Full Name (Last, First, Middle Initial)

Mailing Address 1616 GLENBROOK COURT

City COLUMBIA State MO Zip Code 65203-5345

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **04 / 09 / 2015**
Transaction ID : **SA11.80514**

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANA HAWTHORNE
Full Name (Last, First, Middle Initial)

Mailing Address 1616 GLENBROOK COURT

City COLUMBIA State MO Zip Code 65203-5345

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : **SA11.84402**

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 246 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAN HAYDEN
Full Name (Last, First, Middle Initial)

Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2015

Transaction ID : SA11.75013

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAN HAYDEN
Full Name (Last, First, Middle Initial)

Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : SA11.75679

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAN HAYDEN
Full Name (Last, First, Middle Initial)

Mailing Address 540 SANDY WAY

City BENICIA	State CA	Zip Code 94510-2623
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79344

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 247 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. FORREST HAYES

Mailing Address **56 WEXFORD ON THE GREEN**

City HILTON HEAD	State SC	Zip Code 29928-6125
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt
 / /
Transaction ID : SA11.74473

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. FORREST HAYES

Mailing Address **56 WEXFORD ON THE GREEN**

City HILTON HEAD	State SC	Zip Code 29928-6125
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt
 / /
Transaction ID : SA11.82176

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. FORREST HAYES

Mailing Address **56 WEXFORD ON THE GREEN**

City HILTON HEAD	State SC	Zip Code 29928-6125
----------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
---------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **355.00**

Date of Receipt
 / /
Transaction ID : SA11.85037

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 248 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES HEDGE
Full Name (Last, First, Middle Initial)
Mailing Address 6002 E 5TH MANOR

City PALATKA	State FL	Zip Code 32177-3836
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54331

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES HEDGE
Full Name (Last, First, Middle Initial)
Mailing Address 6002 E 5TH MANOR

City PALATKA	State FL	Zip Code 32177-3836
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64800

Amount of Each Receipt this Period

4	3	2	1	0	.	2	5
25.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. G.TARINEE HEFTER
Full Name (Last, First, Middle Initial)
Mailing Address 93-7 RIVERVIEW APTS.

City JOHNSON	State VT	Zip Code 05656-9117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
515.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2015

Transaction ID : SA11.75509

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2015

Transaction ID : SA11.56068

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.60613

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11.61006

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015

Transaction ID : SA11.61243

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015

Transaction ID : SA11.62731

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2015

Transaction ID : SA11.63701

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 252 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BETTY HELSETH
Full Name (Last, First, Middle Initial)

Mailing Address 4825 Highbury Lane

City MINNETONKA State MN Zip Code 55345-3927

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.84615

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LOIS HEMINGWAY
Full Name (Last, First, Middle Initial)

Mailing Address 741 Bubbling Well Dr

City GLENDORA State CA Zip Code 91741-2053

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 02 / 02 / 2015
Transaction ID : SA11.54634

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LOIS HEMINGWAY
Full Name (Last, First, Middle Initial)

Mailing Address 741 Bubbling Well Dr

City GLENDORA State CA Zip Code 91741-2053

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.54709

Amount of Each Receipt this Period 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 253 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. LOIS HEMINGWAY		Date of Receipt MM / DD / YYYY 02 / 10 / 2015 Transaction ID : SA11.61461
Mailing Address 741 BUBBLING WELL DR		Amount of Each Receipt this Period 6.00
City GLENDORA	State CA	Zip Code 91741-2053
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NONE	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) B. LOIS HEMINGWAY		Date of Receipt MM / DD / YYYY 02 / 19 / 2015 Transaction ID : SA11.62392
Mailing Address 741 BUBBLING WELL DR		Amount of Each Receipt this Period 8.00
City GLENDORA	State CA	Zip Code 91741-2053
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NONE	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) C. LOIS HEMINGWAY		Date of Receipt MM / DD / YYYY 02 / 28 / 2015 Transaction ID : SA11.62843
Mailing Address 741 BUBBLING WELL DR		Amount of Each Receipt this Period 10.00
City GLENDORA	State CA	Zip Code 91741-2053
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer NONE	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

SUBTOTAL of Receipts This Page (optional).....▶	24.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 254 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LOIS HEMINGWAY
Full Name (Last, First, Middle Initial)
Mailing Address 741 BUBBLING WELL DR
City GLENDORA State CA Zip Code 91741-2053
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **224.00**

Date of Receipt **03 / 09 / 2015**
Transaction ID : SA11.63863
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LOIS HEMINGWAY
Full Name (Last, First, Middle Initial)
Mailing Address 741 BUBBLING WELL DR
City GLENDORA State CA Zip Code 91741-2053
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **224.00**

Date of Receipt **03 / 19 / 2015**
Transaction ID : SA11.65144
Amount of Each Receipt this Period **12.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LOIS HEMINGWAY
Full Name (Last, First, Middle Initial)
Mailing Address 741 BUBBLING WELL DR
City GLENDORA State CA Zip Code 91741-2053
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **224.00**

Date of Receipt **04 / 27 / 2015**
Transaction ID : SA11.82429
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **32.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SIGWULF HERMANN
Full Name (Last, First, Middle Initial)
Mailing Address 4432 52ND AV NE

City SEATTLE	State WA	Zip Code 98105-4936
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.55834

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SIGWULF HERMANN
Full Name (Last, First, Middle Initial)
Mailing Address 4432 52ND AV NE

City SEATTLE	State WA	Zip Code 98105-4936
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.56279

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SIGWULF HERMANN
Full Name (Last, First, Middle Initial)
Mailing Address 4432 52ND AV NE

City SEATTLE	State WA	Zip Code 98105-4936
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA11.58523

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 256 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
01 / 27 / 2015

Transaction ID : SA11.54256

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
02 / 19 / 2015

Transaction ID : SA11.56625

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
03 / 11 / 2015

Transaction ID : SA11.58364

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **75.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 257 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

Transaction ID : SA11.58907

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SA11.59373

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
03 / 05 / 2015

Transaction ID : SA11.63354

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 258 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICEWATERHOUSECOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
03 / 28 / 2015

Transaction ID : SA11.65386

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICEWATERHOUSECOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
03 / 30 / 2015

Transaction ID : SA11.65400

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICEWATERHOUSECOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015

Transaction ID : SA11.71079

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **75.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 259 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
05 / 27 / 2015

Transaction ID : SA11.75595

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SA11.76281

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT HETLER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 99

City State Zip Code
SUTTONS BAY MI 49682-0099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRICewaterhouseCOOPERS LLP RETIRED PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
04 / 10 / 2015

Transaction ID : SA11.80609

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. VISA HEUER

Mailing Address 447 DUDLEY DR

City State Zip Code
SHREVEPORT LA 71104-5021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71081

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. WILLIAM HILDRETH

Mailing Address 386 SUNSET DR

City State Zip Code
ENCINITAS CA 92024-2637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.57588

Amount of Each Receipt this Period
80.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. WILLIAM HILDRETH

Mailing Address 386 SUNSET DR

City State Zip Code
ENCINITAS CA 92024-2637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 05 / 2015
Transaction ID : SA11.59540

Amount of Each Receipt this Period
80.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 660.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM HILDRETH
 Full Name (Last, First, Middle Initial)
 Mailing Address 386 SUNSET DR
 City ENCINITAS State CA Zip Code 92024-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11.60938
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM HILDRETH
 Full Name (Last, First, Middle Initial)
 Mailing Address 386 SUNSET DR
 City ENCINITAS State CA Zip Code 92024-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71088
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM HILDRETH
 Full Name (Last, First, Middle Initial)
 Mailing Address 386 SUNSET DR
 City ENCINITAS State CA Zip Code 92024-2637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11.76061
 Amount of Each Receipt this Period
 80.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 263 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH HILL
Full Name (Last, First, Middle Initial)

Mailing Address 750 SOUTH DOUGLAS ST

City EL SEGUNDO State CA Zip Code 90245-4901

FEC ID number of contributing federal political committee. **C**

Name of Employer METALORE Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84377

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. AL HILL, JR.
Full Name (Last, First, Middle Initial)

Mailing Address 47 HIGHLAND PARK VILLAGE

City DALLAS State TX Zip Code 75205-2727

FEC ID number of contributing federal political committee. **C**

Name of Employer A.G. HILL PARTNERS, LLC Occupation INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 13 / 2015
Transaction ID : SA11.81089

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GEORGE HILLER
Full Name (Last, First, Middle Initial)

Mailing Address 2606 LONG BOAT COURT NORTH

City PONTE VEDRA BEACH State FL Zip Code 32082-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer RET. Occupation RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.54918

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	5125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 264 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TATNALL HILLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 504 W BLEEKER ST
City ASPEN State CO Zip Code 81611-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5150.00

Date of Receipt 03 / 26 / 2015
Transaction ID : SA11.59433
Amount of Each Receipt this Period 1000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TATNALL HILLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 504 W BLEEKER ST
City ASPEN State CO Zip Code 81611-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5150.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.64037
Amount of Each Receipt this Period 2500.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TATNALL HILLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 504 W BLEEKER ST
City ASPEN State CO Zip Code 81611-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5150.00

Date of Receipt 03 / 16 / 2015
Transaction ID : SA11.64919
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 265 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. TATNALL HILLMAN		Date of Receipt MM / DD / YYYY 05 / 05 / 2015 Transaction ID : SA11.71090
Mailing Address 504 W BLEEKER ST		Amount of Each Receipt this Period 500.00
City ASPEN	State CO	Zip Code 81611-1228
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. TATNALL HILLMAN		Date of Receipt MM / DD / YYYY 06 / 05 / 2015 Transaction ID : SA11.76139
Mailing Address 504 W BLEEKER ST		Amount of Each Receipt this Period 500.00
City ASPEN	State CO	Zip Code 81611-1228
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. TATNALL HILLMAN		Date of Receipt MM / DD / YYYY 04 / 05 / 2015 Transaction ID : SA11.79575
Mailing Address 504 W BLEEKER ST		Amount of Each Receipt this Period 500.00
City ASPEN	State CO	Zip Code 81611-1228
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SELF	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5150.00	

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 266 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TATNALL HILLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 504 W BLEEKER ST
City ASPEN State CO Zip Code 81611-1228
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5150.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84391
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. VINCENT HODGSON
Full Name (Last, First, Middle Initial)
Mailing Address 1S630 ARDENNES CT
City WINFIELD State IL Zip Code 60190-1720
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.54751
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. VINCENT HODGSON
Full Name (Last, First, Middle Initial)
Mailing Address 1S630 ARDENNES CT
City WINFIELD State IL Zip Code 60190-1720
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11.76249
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 267 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
01 / 19 / 2015
Transaction ID : SA11.59573

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
01 / 27 / 2015
Transaction ID : SA11.59635

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
01 / 28 / 2015
Transaction ID : SA11.59849

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 268 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71104

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : SA11.73915

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES HOLLIDAY
Full Name (Last, First, Middle Initial)
Mailing Address 2400 LYLA LANE

City LEANDER	State TX	Zip Code 78641-2729
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.82789

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 269 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUSSELL HOLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 6521 VEGA DR.
City FORT WORTH State TX Zip Code 76133-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer PART TIME Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 05 / 2015
Transaction ID : SA11.54118
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUSSELL HOLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 6521 VEGA DR.
City FORT WORTH State TX Zip Code 76133-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer PART TIME Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.55375
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUSSELL HOLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 6521 VEGA DR.
City FORT WORTH State TX Zip Code 76133-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer PART TIME Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.63323
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 270 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUSSELL HOLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 6521 VEGA DR.
City FORT WORTH State TX Zip Code 76133-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer PART TIME Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71106
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUSSELL HOLLINS
Full Name (Last, First, Middle Initial)
Mailing Address 6521 VEGA DR.
City FORT WORTH State TX Zip Code 76133-5623
FEC ID number of contributing federal political committee. **C**
Name of Employer PART TIME Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 05 / 2015
Transaction ID : SA11.79526
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NOEL HOLUB
Full Name (Last, First, Middle Initial)
Mailing Address 5805 INDIANWOOD LANE
City FORT WORTH State TX Zip Code 76132-4490
FEC ID number of contributing federal political committee. **C**
Name of Employer FTI INDUSTRIES, INC. Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 16 / 2015
Transaction ID : SA11.76966
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 272 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2015
Transaction ID : SA11.73918

Amount of Each Receipt this Period

 9.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 23 / 2015
Transaction ID : SA11.75482

Amount of Each Receipt this Period

 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11.76585

Amount of Each Receipt this Period

 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> . <input type="text"/> . 44.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/> .

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 273 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2015

Transaction ID : SA11.76621

Amount of Each Receipt this Period

28.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2015

Transaction ID : SA11.77304

Amount of Each Receipt this Period

19.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79912

Amount of Each Receipt this Period

28.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 274 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 / /

Transaction ID : SA11.80418

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 / /

Transaction ID : SA11.81062

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt
 / /

Transaction ID : SA11.81867

Amount of Each Receipt this Period

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="44.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 275 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID LK HUANG
Full Name (Last, First, Middle Initial)

Mailing Address 1462 25TH AVE

City SAN FRANCISCO	State CA	Zip Code 94122-3318
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LINDA YC HUANG	Occupation PROPERTY SALES.
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SA11.84716

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	0

20.16

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)

Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA11.54150

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)

Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.54374

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								1	5

15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.16
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 276 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.58129

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									20.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2015

Transaction ID : SA11.58683

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59827

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
									15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 277 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.60926

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA11.62719

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.62922

Amount of Each Receipt this Period

20.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 278 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA11.65320

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2015

Transaction ID : SA11.65387

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72285

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 279 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74502

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : SA11.75796

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2015

Transaction ID : SA11.76795

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 280 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2015

Transaction ID : SA11.77374

Amount of Each Receipt this Period

15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79251

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACQUELINE HUESING
Full Name (Last, First, Middle Initial)
Mailing Address 4660 LADERA WAY

City CARMICHAEL	State CA	Zip Code 95608-1574
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2015

Transaction ID : SA11.80378

Amount of Each Receipt this Period

15.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)
Mailing Address 169 KINGFISHER CIR
City POOLER State GA Zip Code 31322-9763
FEC ID number of contributing federal political committee. **C**
Name of Employer PFIZER Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **710.00**

Date of Receipt **03 / 11 / 2015**
Transaction ID : SA11.58363
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)
Mailing Address 169 KINGFISHER CIR
City POOLER State GA Zip Code 31322-9763
FEC ID number of contributing federal political committee. **C**
Name of Employer PFIZER Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **710.00**

Date of Receipt **01 / 22 / 2015**
Transaction ID : SA11.59602
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)
Mailing Address 169 KINGFISHER CIR
City POOLER State GA Zip Code 31322-9763
FEC ID number of contributing federal political committee. **C**
Name of Employer PFIZER Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **710.00**

Date of Receipt **02 / 19 / 2015**
Transaction ID : SA11.62304
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **100.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 283 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 169 KINGFISHER CIR

City POOLER State GA Zip Code 31322-9763

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : SA11.65187

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 169 KINGFISHER CIR

City POOLER State GA Zip Code 31322-9763

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 17 / 2015
Transaction ID : SA11.77121

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 169 KINGFISHER CIR

City POOLER State GA Zip Code 31322-9763

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
710.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2015
Transaction ID : SA11.79003

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 284 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)
Mailing Address 169 KINGFISHER CIR
City POOLER State GA Zip Code 31322-9763
FEC ID number of contributing federal political committee. **C**
Name of Employer PFIZER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 710.00

Date of Receipt 04 / 23 / 2015
Transaction ID : SA11.81662
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELIZABETH JACKSON
Full Name (Last, First, Middle Initial)
Mailing Address 169 KINGFISHER CIR
City POOLER State GA Zip Code 31322-9763
FEC ID number of contributing federal political committee. **C**
Name of Employer PFIZER Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 710.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83429
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THEODORE JANECZEK
Full Name (Last, First, Middle Initial)
Mailing Address 350CEDAR RD
City HERSHEY State PA Zip Code 17033-9302
FEC ID number of contributing federal political committee. **C**
Name of Employer GEORGE M LEADER FAMILY CORP Occupation EVP&CFO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71160
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 285 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOE W JANICK
Full Name (Last, First, Middle Initial)

Mailing Address 2533 EAST BERYL AVE

City PHOENIX State AZ Zip Code 85028-3714

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2015

Transaction ID : SA11.80525

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ERIC M. JAVITS
Full Name (Last, First, Middle Initial)

Mailing Address 150 BRADLEY PLACE

City PALM BEACH State FL Zip Code 33480-3804

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation DIPLOMAT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11.72805

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ERIC M. JAVITS
Full Name (Last, First, Middle Initial)

Mailing Address 150 BRADLEY PLACE

City PALM BEACH State FL Zip Code 33480-3804

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation DIPLOMAT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2015

Transaction ID : SA11.81966

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. M. LEE JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 8776 MONDEGO WAY

City State Zip Code
FAIR OAKS CA 95628-3920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **311.07**

Date of Receipt
03 / 30 / 2015

Transaction ID : SA11.59466

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. M. LEE JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 8776 MONDEGO WAY

City State Zip Code
FAIR OAKS CA 95628-3920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **311.07**

Date of Receipt
01 / 18 / 2015

Transaction ID : SA11.59553

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. M. LEE JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 8776 MONDEGO WAY

City State Zip Code
FAIR OAKS CA 95628-3920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **311.07**

Date of Receipt
05 / 14 / 2015

Transaction ID : SA11.73923

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **60.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 289 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TODD JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 721 RIDGEWOOD ROAD

City DULUTH State MN Zip Code 55804-1732

FEC ID number of contributing federal political committee. **C**

Name of Employer CAPSTAN CORPORATION Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2015
Transaction ID : SA11.76702

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TODD JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 721 RIDGEWOOD ROAD

City DULUTH State MN Zip Code 55804-1732

FEC ID number of contributing federal political committee. **C**

Name of Employer CAPSTAN CORPORATION Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2015
Transaction ID : SA11.79093

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARION JONES
Full Name (Last, First, Middle Initial)

Mailing Address 8010 SALTA VERDE PT

City KATY State TX Zip Code 77494-2526

FEC ID number of contributing federal political committee. **C**

Name of Employer EXPLORATION TECHNOLOGIES, INC. Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2015
Transaction ID : SA11.61746

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 290 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT JONES
Full Name (Last, First, Middle Initial)

Mailing Address 3715 LYNWOOD WAY

City SACRAMENTO State CA Zip Code 95864-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.55181

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT JONES
Full Name (Last, First, Middle Initial)

Mailing Address 3715 LYNWOOD WAY

City SACRAMENTO State CA Zip Code 95864-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2015

Transaction ID : SA11.60042

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. VIRGIL JURGENSMEYER
Full Name (Last, First, Middle Initial)

Mailing Address 1920 7TH AVE NE

City MIAMI State OK Zip Code 74354-4957

FEC ID number of contributing federal political committee. **C**

Name of Employer J-M FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11.56819

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 291 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. VIRGIL JURGENSMEYER
Full Name (Last, First, Middle Initial)

Mailing Address 1920 7TH AVE NE

City MIAMI State OK Zip Code 74354-4957

FEC ID number of contributing federal political committee. **C**

Name of Employer J-M FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83440

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE KADONADA
Full Name (Last, First, Middle Initial)

Mailing Address 5954 WATERFRONT PLACE

City LONG BEACH State CA Zip Code 90803-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer USBENEFITS INS. SERVICES, LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 07 / 2015
Transaction ID : SA11.63766

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GEORGE KADONADA
Full Name (Last, First, Middle Initial)

Mailing Address 5954 WATERFRONT PLACE

City LONG BEACH State CA Zip Code 90803-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer USBENEFITS INS. SERVICES, LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74525

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 200.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 292 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GEORGE KADONADA
Full Name (Last, First, Middle Initial)

Mailing Address 5954 WATERFRONT PLACE

City LONG BEACH State CA Zip Code 90803-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer USBENEFITS INS. SERVICES, LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79070

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GEORGE KADONADA
Full Name (Last, First, Middle Initial)

Mailing Address 5954 WATERFRONT PLACE

City LONG BEACH State CA Zip Code 90803-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer USBENEFITS INS. SERVICES, LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2015
Transaction ID : SA11.80803

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GEORGE KADONADA
Full Name (Last, First, Middle Initial)

Mailing Address 5954 WATERFRONT PLACE

City LONG BEACH State CA Zip Code 90803-4838

FEC ID number of contributing federal political committee. **C**

Name of Employer USBENEFITS INS. SERVICES, LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83629

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 293 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES KAUFMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3305 MATHIESON DR

City ATLANTA State GA Zip Code 30305-1722

FEC ID number of contributing federal political committee. **C**

Name of Employer MERRILL LYNCK Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11.72812

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES KAUFMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3305 MATHIESON DR

City ATLANTA State GA Zip Code 30305-1722

FEC ID number of contributing federal political committee. **C**

Name of Employer MERRILL LYNCK Occupation FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83649

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JANET KEMPIS
Full Name (Last, First, Middle Initial)

Mailing Address 18460 ALLENDALE

City SARATOGA State CA Zip Code 95070-5233

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60354

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JANET KEMPIS
Full Name (Last, First, Middle Initial)
Mailing Address 18460 ALLENDALE
City SARATOGA State CA Zip Code 95070-5233
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **205.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : SA11.79023
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JERROLD KENDALL
Full Name (Last, First, Middle Initial)
Mailing Address 9 TABBY ROAD
City HILTON HEAD ISLAND State SC Zip Code 29928-3824
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **375.00**

Date of Receipt **02 / 05 / 2015**
Transaction ID : SA11.55581
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JERROLD KENDALL
Full Name (Last, First, Middle Initial)
Mailing Address 9 TABBY ROAD
City HILTON HEAD ISLAND State SC Zip Code 29928-3824
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **375.00**

Date of Receipt **05 / 05 / 2015**
Transaction ID : SA11.71230
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **175.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 295 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JERROLD KENDALL
Full Name (Last, First, Middle Initial)

Mailing Address 9 TABBY ROAD

City HILTON HEAD ISLAND State SC Zip Code 29928-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11.72814

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JERROLD KENDALL
Full Name (Last, First, Middle Initial)

Mailing Address 9 TABBY ROAD

City HILTON HEAD ISLAND State SC Zip Code 29928-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.75055

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JERROLD KENDALL
Full Name (Last, First, Middle Initial)

Mailing Address 9 TABBY ROAD

City HILTON HEAD ISLAND State SC Zip Code 29928-3824

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11.83567

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 296 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CAROLYN KENNEY
Full Name (Last, First, Middle Initial)
Mailing Address 201 BARBERRY DR
City BENSON State NC Zip Code 27504-8022
FEC ID number of contributing federal political committee. **C**
Name of Employer MOHAWK IND. Occupation WAREHOUSE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61541
Amount of Each Receipt this Period 5.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EMILY KENT
Full Name (Last, First, Middle Initial)
Mailing Address 4168 SEVEN LAKES WEST
City SEVEN LAKES State NC Zip Code 27376-9317
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.55234
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EMILY KENT
Full Name (Last, First, Middle Initial)
Mailing Address 4168 SEVEN LAKES WEST
City SEVEN LAKES State NC Zip Code 27376-9317
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 07 / 2015
Transaction ID : SA11.63681
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 297 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. EMILY KENT

Mailing Address 4168 SEVEN LAKES WEST

City SEVEN LAKES	State NC	Zip Code 27376-9317
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.64001

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARILYN KETTS

Mailing Address 18101 AT LAST FARM RD.

City AQUASCO	State MD	Zip Code 20608-2301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOUSEWIFE
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.54094

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MARILYN KETTS

Mailing Address 18101 AT LAST FARM RD.

City AQUASCO	State MD	Zip Code 20608-2301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOUSEWIFE
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57453

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 298 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARILYN KETTS
Full Name (Last, First, Middle Initial)
Marilyn KETTS
Mailing Address 18101 AT LAST FARM RD.
City AQUASCO State MD Zip Code 20608-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **285.00**

Date of Receipt **01 / 28 / 2015**
Transaction ID : SA11.59808
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARILYN KETTS
Full Name (Last, First, Middle Initial)
Marilyn KETTS
Mailing Address 18101 AT LAST FARM RD.
City AQUASCO State MD Zip Code 20608-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **285.00**

Date of Receipt **02 / 05 / 2015**
Transaction ID : SA11.60929
Amount of Each Receipt this Period **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARILYN KETTS
Full Name (Last, First, Middle Initial)
Marilyn KETTS
Mailing Address 18101 AT LAST FARM RD.
City AQUASCO State MD Zip Code 20608-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **285.00**

Date of Receipt **02 / 17 / 2015**
Transaction ID : SA11.62029
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **25.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 299 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARILYN KETTS
Full Name (Last, First, Middle Initial)
Marilyn KETTS
Mailing Address 18101 AT LAST FARM RD.
City AQUASCO State MD Zip Code 20608-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **285.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : SA11.76053
Amount of Each Receipt this Period **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARILYN KETTS
Full Name (Last, First, Middle Initial)
Marilyn KETTS
Mailing Address 18101 AT LAST FARM RD.
City AQUASCO State MD Zip Code 20608-2301
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation HOUSEWIFE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **285.00**

Date of Receipt **04 / 05 / 2015**
Transaction ID : SA11.79426
Amount of Each Receipt this Period **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN KIDD
Full Name (Last, First, Middle Initial)
John KIDD
Mailing Address 118 MAIN ST
City TOPSFIELD State MA Zip Code 01983-1422
FEC ID number of contributing federal political committee. **C**
Name of Employer DUTTON FAMILY CARE ASSOCIATES LLP Occupation PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt **02 / 06 / 2015**
Transaction ID : SA11.61229
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN KIDD
Full Name (Last, First, Middle Initial)
Mailing Address 118 MAIN ST
City TOPSFIELD State MA Zip Code 01983-1422
FEC ID number of contributing federal political committee. **C**
Name of Employer DUTTON FAMILY CARE ASSOCIATES LLP Occupation PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt **02 / 11 / 2015**
Transaction ID : SA11.61688
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN KIDD
Full Name (Last, First, Middle Initial)
Mailing Address 118 MAIN ST
City TOPSFIELD State MA Zip Code 01983-1422
FEC ID number of contributing federal political committee. **C**
Name of Employer DUTTON FAMILY CARE ASSOCIATES LLP Occupation PHYSICIAN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt **03 / 17 / 2015**
Transaction ID : SA11.65495
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CLAUDIA KILGORE-GUSARSON
Full Name (Last, First, Middle Initial)
Mailing Address 18265 SOUTHVIEW AVENUE
City LOS GATOS State CA Zip Code 95033-8537
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **710.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.55331
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **125.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 301 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 02 / 16 / 2015
Transaction ID : SA11.56193
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 02 / 19 / 2015
Transaction ID : SA11.56642
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 03 / 02 / 2015
Transaction ID : SA11.57262
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 302 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 03 / 19 / 2015
Transaction ID : SA11.59256
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 05 / 27 / 2015
Transaction ID : SA11.75603
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 04 / 06 / 2015
Transaction ID : SA11.79918
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 303 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CLAUDIA KILGORE-GUSARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 18265 SOUTHVIEW AVENUE
 City LOS GATOS State CA Zip Code 95033-8537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 710.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84319
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES KIMBALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2460 FRANCISCO ST
 City SAN FRANCISCO State CA Zip Code 94123-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TELECOMMUNICATIONS Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.16

Date of Receipt 02 / 28 / 2015
Transaction ID : SA11.57082
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES KIMBALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2460 FRANCISCO ST
 City SAN FRANCISCO State CA Zip Code 94123-1815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TELECOMMUNICATIONS Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.16

Date of Receipt 03 / 07 / 2015
Transaction ID : SA11.57939
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 304 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES KIMBALL
Full Name (Last, First, Middle Initial)

Mailing Address 2460 FRANCISCO ST

City SAN FRANCISCO State CA Zip Code 94123-1815

FEC ID number of contributing federal political committee. **C**

Name of Employer TELECOMMUNICATIONS Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.82960

Amount of Each Receipt this Period
 20.16

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES KING
Full Name (Last, First, Middle Initial)

Mailing Address 5017 SAN JOAQUIN DRIVE

City SAN DIEGO State CA Zip Code 92109-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer DLK INVESTMENT MANAGEMENT Occupation INVESTMENT ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2015
Transaction ID : SA11.57258

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES KING
Full Name (Last, First, Middle Initial)

Mailing Address 5017 SAN JOAQUIN DRIVE

City SAN DIEGO State CA Zip Code 92109-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer DLK INVESTMENT MANAGEMENT Occupation INVESTMENT ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 535.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.59015

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	120.16
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 305 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CHARLES KING

Mailing Address 5017 SAN JOAQUIN DRIVE

City SAN DIEGO	State CA	Zip Code 92109-1513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DLK INVESTMENT MANAGEMENT	Occupation INVESTMENT ADVISOR
-----------------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76295

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. CHARLES KING

Mailing Address 5017 SAN JOAQUIN DRIVE

City SAN DIEGO	State CA	Zip Code 92109-1513
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DLK INVESTMENT MANAGEMENT	Occupation INVESTMENT ADVISOR
-----------------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81608

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. SAM KIRBY

Mailing Address 14519 WINDY RIDGE

City HOUSTON	State TX	Zip Code 77062-2363
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED AIR FORCE	Occupation RETIRED AIR FORCE
---------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.55071

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 306 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SAM KIRBY
Full Name (Last, First, Middle Initial)

Mailing Address 14519 WINDY RIDGE

City HOUSTON State TX Zip Code 77062-2363

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED AIR FORCE Occupation RETIRED AIR FORCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015
Transaction ID : SA11.57606

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SAM KIRBY
Full Name (Last, First, Middle Initial)

Mailing Address 14519 WINDY RIDGE

City HOUSTON State TX Zip Code 77062-2363

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED AIR FORCE Occupation RETIRED AIR FORCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.59667

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SAM KIRBY
Full Name (Last, First, Middle Initial)

Mailing Address 14519 WINDY RIDGE

City HOUSTON State TX Zip Code 77062-2363

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED AIR FORCE Occupation RETIRED AIR FORCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60284

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JAMES KIRK

Mailing Address 6132 RAINBOW HEIGHTS RD

City FALLBROOK	State CA	Zip Code 92028-8847
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SA11.56873

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JAMES KIRK

Mailing Address 6132 RAINBOW HEIGHTS RD

City FALLBROOK	State CA	Zip Code 92028-8847
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2015

Transaction ID : SA11.59470

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. GERALD KIRKE

Mailing Address 5465 MILLS CIVIC PARKWAY

City WEST DES MOINES	State IA	Zip Code 50266-5318
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer KIRKE FINANCIAL SERVICES	Occupation SELF
----------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79981

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 308 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BERNARD KOETHER
Full Name (Last, First, Middle Initial)

Mailing Address 757 SE 17TH STREET
STE 1074

City FORT LAUDERDALE State FL Zip Code 33316-2960

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2015

Transaction ID : SA11.57353

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BERNARD KOETHER
Full Name (Last, First, Middle Initial)

Mailing Address 757 SE 17TH STREET
STE 1074

City FORT LAUDERDALE State FL Zip Code 33316-2960

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2015

Transaction ID : SA11.62872

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BERNARD KOETHER
Full Name (Last, First, Middle Initial)

Mailing Address 757 SE 17TH STREET
STE 1074

City FORT LAUDERDALE State FL Zip Code 33316-2960

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2015

Transaction ID : SA11.63735

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 309 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHAEL KOSLOSKY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 181

City NEBRASKA CITY State NE Zip Code 68410-0181

FEC ID number of contributing federal political committee. **C**

Name of Employer MAGNOLIA METAL CORP. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.64035

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHAEL KOSLOSKY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 181

City NEBRASKA CITY State NE Zip Code 68410-0181

FEC ID number of contributing federal political committee. **C**

Name of Employer MAGNOLIA METAL CORP. Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83636

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. STANLEY KUECKER
Full Name (Last, First, Middle Initial)

Mailing Address 801 WEST MARKEY ROAD

City BELTON State MO Zip Code 64012-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer KUECKER LOGISTICS GROUP Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71261

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 310 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANNE KURZET
Full Name (Last, First, Middle Initial)
Mailing Address 33762 VALLE ROAD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675-4816
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT APPLICABLE	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SA11.54623

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ANNE KURZET
Full Name (Last, First, Middle Initial)
Mailing Address 33762 VALLE ROAD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675-4816
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT APPLICABLE	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64917

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ANNE KURZET
Full Name (Last, First, Middle Initial)
Mailing Address 33762 VALLE ROAD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675-4816
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT APPLICABLE	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2015

Transaction ID : SA11.65305

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 311 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANNE KURZET
Full Name (Last, First, Middle Initial)

Mailing Address 33762 VALLE ROAD

City SAN JUAN CAPISTRAN State CA Zip Code 92675-4816

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT APPLICABLE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015
Transaction ID : SA11.65402

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DANIEL KUZNAR
Full Name (Last, First, Middle Initial)

Mailing Address 648 RANCH DR

City MUSKEGON State MI Zip Code 49441-4942

FEC ID number of contributing federal political committee. **C**

Name of Employer QUALITY TOOL & STAMPING CO Occupation SELF EMPL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA11.65578

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DANIEL KUZNAR
Full Name (Last, First, Middle Initial)

Mailing Address 648 RANCH DR

City MUSKEGON State MI Zip Code 49441-4942

FEC ID number of contributing federal political committee. **C**

Name of Employer QUALITY TOOL & STAMPING CO Occupation SELF EMPL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11.80689

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 312 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD LABARE
Full Name (Last, First, Middle Initial)
Mailing Address 24 PRINCETON DR.
City RANCHO MIRAGE State CA Zip Code 92270-3159
FEC ID number of contributing federal political committee. **C**
Name of Employer RBC CORRESPONDENT SERVICES Occupation CERTIFIED FINANCIAL PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA11.56450
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD LABARE
Full Name (Last, First, Middle Initial)
Mailing Address 24 PRINCETON DR.
City RANCHO MIRAGE State CA Zip Code 92270-3159
FEC ID number of contributing federal political committee. **C**
Name of Employer RBC CORRESPONDENT SERVICES Occupation CERTIFIED FINANCIAL PLANNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58209
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROLLAND LACHARITE
Full Name (Last, First, Middle Initial)
Mailing Address 3 GLEN ECHO
City DOVE CANYON State CA Zip Code 92679-3507
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 02 / 19 / 2015
Transaction ID : SA11.56633
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 313 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROLLAND LACHARITE
Full Name (Last, First, Middle Initial)
Mailing Address 3 GLEN ECHO

City DOVE CANYON	State CA	Zip Code 92679-3507
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.76975

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROLLAND LACHARITE
Full Name (Last, First, Middle Initial)
Mailing Address 3 GLEN ECHO

City DOVE CANYON	State CA	Zip Code 92679-3507
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77990

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HARRIETT LACKEY
Full Name (Last, First, Middle Initial)
Mailing Address 1506 CANDLER RD

City GAINESVILLE	State GA	Zip Code 30507-8423
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NEGAMEDICALCENTER	Occupation RETIRED
---------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57559

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 315 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SARA LAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 8501 BAZEMORE RD.
City CORDOVA State TN Zip Code 38018-4339
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SEMI-RETIRED REAL ESTATE AGENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt **06 / 30 / 2015**
Transaction ID : SA11.77651
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SARA LAMAN
Full Name (Last, First, Middle Initial)
Mailing Address 8501 BAZEMORE RD.
City CORDOVA State TN Zip Code 38018-4339
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation SEMI-RETIRED REAL ESTATE AGENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt **04 / 04 / 2015**
Transaction ID : SA11.79406
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LESLIE LAMONT
Full Name (Last, First, Middle Initial)
Mailing Address 7215 WINTER BERRY LANE
City CASTLE PINES State CO Zip Code 80108-3687
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **310.00**

Date of Receipt **03 / 02 / 2015**
Transaction ID : SA11.57238
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **150.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 318 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDRA LAPADOT
Full Name (Last, First, Middle Initial)
Mailing Address 1941 SQUIRREL RD
City BLOOMFIELD HILLS State MI Zip Code 48304-1162
FEC ID number of contributing federal political committee. **C**
Name of Employer NA Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA11.59948
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SANDRA LAPADOT
Full Name (Last, First, Middle Initial)
Mailing Address 1941 SQUIRREL RD
City BLOOMFIELD HILLS State MI Zip Code 48304-1162
FEC ID number of contributing federal political committee. **C**
Name of Employer NA Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 02 / 19 / 2015
Transaction ID : SA11.62390
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SANDRA LAPADOT
Full Name (Last, First, Middle Initial)
Mailing Address 1941 SQUIRREL RD
City BLOOMFIELD HILLS State MI Zip Code 48304-1162
FEC ID number of contributing federal political committee. **C**
Name of Employer NA Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71285
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 45.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 319 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDRA LAPADOT
Full Name (Last, First, Middle Initial)

Mailing Address 1941 SQUIRREL RD

City BLOOMFIELD HILLS State MI Zip Code 48304-1162

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2015
Transaction ID : SA11.81286

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)

Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER State NH Zip Code 03868-5910

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 03 / 2015
Transaction ID : SA11.54690

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)

Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER State NH Zip Code 03868-5910

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : SA11.56578

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 320 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71292

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71293

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76079

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 321 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76093

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2015

Transaction ID : SA11.79545

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEONARD L LASSOR
Full Name (Last, First, Middle Initial)
Mailing Address 690 SALMON FALLS ROAD

City ROCHESTER	State NH	Zip Code 03868-5910
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2015

Transaction ID : SA11.79547

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 322 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. HAZEL LATHAM

Mailing Address 1880 BROOKWOOD AVENUE
APARTMENT 505

City BURLINGTON State NC Zip Code 27215-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer NA/ Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 29 / 2015
Transaction ID : SA11.54571

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. HAZEL LATHAM

Mailing Address 1880 BROOKWOOD AVENUE
APARTMENT 505

City BURLINGTON State NC Zip Code 27215-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer NA/ Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 03 / 2015
Transaction ID : SA11.63144

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. RON LAVENDER

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
02 / 06 / 2015
Transaction ID : SA11.55671

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 323 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 03 / 19 / 2015
Transaction ID : SA11.65156

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 03 / 26 / 2015
Transaction ID : SA11.65350

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 04 / 07 / 2015
Transaction ID : SA11.80205

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 324 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2015
Transaction ID : SA11.80783

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2015
Transaction ID : SA11.81692

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RON LAVENDER
Full Name (Last, First, Middle Initial)

Mailing Address 9349 LINCOLN AV

City CLIVE State IA Zip Code 50325-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 29 / 2015
Transaction ID : SA11.84968

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 325 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANNE LAWRENCE
Full Name (Last, First, Middle Initial)
Mailing Address 2585 162ND ROAD

City OXFORD	State KS	Zip Code 67119-9044
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FAMILY FARM	Occupation SELF
---------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.60051

Amount of Each Receipt this Period
150.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THOMAS LAWRENCE
Full Name (Last, First, Middle Initial)
Mailing Address 1717HOMEWOOD BLVD
APT 523

City DELRAY BEACH	State FL	Zip Code 33445-6944
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2015

Transaction ID : SA11.59599

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS LAWRENCE
Full Name (Last, First, Middle Initial)
Mailing Address 1717HOMEWOOD BLVD
APT 523

City DELRAY BEACH	State FL	Zip Code 33445-6944
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11.62415

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 326 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. THOMAS LAWRENCE
Full Name (Last, First, Middle Initial)

Mailing Address 1717HOMEWOOD BLVD
APT 523

City DELRAY BEACH State FL Zip Code 33445-6944

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
06 / 05 / 2015
Transaction ID : SA11.76210

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THOMAS LAWRENCE
Full Name (Last, First, Middle Initial)

Mailing Address 1717HOMEWOOD BLVD
APT 523

City DELRAY BEACH State FL Zip Code 33445-6944

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
06 / 30 / 2015
Transaction ID : SA11.77904

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS LAWRENCE
Full Name (Last, First, Middle Initial)

Mailing Address 1717HOMEWOOD BLVD
APT 523

City DELRAY BEACH State FL Zip Code 33445-6944

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
04 / 23 / 2015
Transaction ID : SA11.81672

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 327 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EVA LAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY	State NV	Zip Code 89703-3611
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57713

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EVA LAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY	State NV	Zip Code 89703-3611
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.59248

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EVA LAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 809 BUNKER HILL DRIVE

City CARSON CITY	State NV	Zip Code 89703-3611
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.62493

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 329 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN LEHMAN
Full Name (Last, First, Middle Initial)

Mailing Address 554 PINE STREET

City MEADVILLE State PA Zip Code 16335-2954

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2015

Transaction ID : SA11.81729

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHRISTOPHER LEITH
Full Name (Last, First, Middle Initial)

Mailing Address 2428 ACANTHUS DR.

City WAKE FOREST State NC Zip Code 27587-7356

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AUTOMOBILE DEALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11.59725

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GERALD LEOPOLD
Full Name (Last, First, Middle Initial)

Mailing Address 2507 AMHERST DR

City WICHITA FALLS State TX Zip Code 76308-5327

FEC ID number of contributing federal political committee. **C**

Name of Employer UNITED SUPERMARKETS Occupation REGISTERED PHARMACIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.54706

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 331 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	06	/	2015

Transaction ID : SA11.55686

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.57083

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2015

Transaction ID : SA11.62736

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 332 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.64442

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2015

Transaction ID : SA11.65388

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ASHLEY LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2015

Transaction ID : SA11.65628

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	65.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 333 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71310

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74567

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2015

Transaction ID : SA11.76715

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 334 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77256

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.78375

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ASHLEY LEWIS

Mailing Address 24320 MALIBU ROAD

City MALIBU	State CA	Zip Code 90265-4612
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation FILMMAKER
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79256

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 335 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NADINE LEYTON
Full Name (Last, First, Middle Initial)
Mailing Address 1150 POLARIS DR

City NEWPORT BEACH	State CA	Zip Code 92660-5723
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation RETIRED
-------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.63146

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NADINE LEYTON
Full Name (Last, First, Middle Initial)
Mailing Address 1150 POLARIS DR

City NEWPORT BEACH	State CA	Zip Code 92660-5723
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER	Occupation RETIRED
-------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72366

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD LILLY
Full Name (Last, First, Middle Initial)
Mailing Address 62 CALEF HWY BX 222

City LEE	State NH	Zip Code 03861-6701
-------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2015

Transaction ID : SA11.73257

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 337 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALT LINEBERRY
Full Name (Last, First, Middle Initial)
Mailing Address 13550 NORLAND ST.
City SAN ANTONIO State TX Zip Code 78232-4917
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74574
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALT LINEBERRY
Full Name (Last, First, Middle Initial)
Mailing Address 13550 NORLAND ST.
City SAN ANTONIO State TX Zip Code 78232-4917
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2015
Transaction ID : SA11.77629
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALT LINEBERRY
Full Name (Last, First, Middle Initial)
Mailing Address 13550 NORLAND ST.
City SAN ANTONIO State TX Zip Code 78232-4917
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 11 / 2015
Transaction ID : SA11.80817
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 338 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALT LINEBERRY
Full Name (Last, First, Middle Initial)
Mailing Address 13550 NORLAND ST.
City SAN ANTONIO State TX Zip Code 78232-4917
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83560
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FREDERICK LLOYD
Full Name (Last, First, Middle Initial)
Mailing Address 37245 VALGIO DR
City CALIMESA State CA Zip Code 92320-1481
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation PHYSICIAN
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11.75817
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES LONG
Full Name (Last, First, Middle Initial)
Mailing Address 1903 PEYCO DRIVE NORTH
City ARLINGTON State TX Zip Code 76001-6705
FEC ID number of contributing federal political committee. **C**
Name of Employer RELIABLE Occupation REAL ESTATE / CONSTRUCTIONS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 05 / 24 / 2015
Transaction ID : SA11.75516
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 339 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES LONG
Full Name (Last, First, Middle Initial)
Mailing Address 1903 PEYCO DRIVE NORTH

City ARLINGTON	State TX	Zip Code 76001-6705
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RELIABLE	Occupation REAL ESTATE / CONSTRUCTIONS
------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2015

Transaction ID : SA11.75526

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES LONG
Full Name (Last, First, Middle Initial)
Mailing Address 1903 PEYCO DRIVE NORTH

City ARLINGTON	State TX	Zip Code 76001-6705
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RELIABLE	Occupation REAL ESTATE / CONSTRUCTIONS
------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83641

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT LONG
Full Name (Last, First, Middle Initial)
Mailing Address PO 99

City MILL SPRING	State NC	Zip Code 28756-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CABLE TEL	Occupation RETIRED
-------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74581

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 340 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARGARET LOPES
Full Name (Last, First, Middle Initial)

Mailing Address 1721 N LAUREL AVE

City UPLAND State CA Zip Code 91784-1977

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015

Transaction ID : SA11.57592

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARGARET LOPES
Full Name (Last, First, Middle Initial)

Mailing Address 1721 N LAUREL AVE

City UPLAND State CA Zip Code 91784-1977

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11.61203

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALONAH LORENZ
Full Name (Last, First, Middle Initial)

Mailing Address 160 40TH AVE SE

City BENSON State MN Zip Code 56215-1358

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 04 / 2015

Transaction ID : SA11.79369

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 341 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LORRAINE LOVELACE
Full Name (Last, First, Middle Initial)
Mailing Address 4974 RIO VERDE DR

City SAN JOSE	State CA	Zip Code 95118-2303
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer IHSS	Occupation PROVIDER
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60767

Amount of Each Receipt this Period

800.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LORRAINE LOVELACE
Full Name (Last, First, Middle Initial)
Mailing Address 4974 RIO VERDE DR

City SAN JOSE	State CA	Zip Code 95118-2303
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer IHSS	Occupation PROVIDER
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2015

Transaction ID : SA11.75375

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LORRAINE LOVELACE
Full Name (Last, First, Middle Initial)
Mailing Address 4974 RIO VERDE DR

City SAN JOSE	State CA	Zip Code 95118-2303
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer IHSS	Occupation PROVIDER
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83536

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 343 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CAROL LUTZ
Full Name (Last, First, Middle Initial)
Mailing Address 72 PINECREST DRIVE
City WOODCLIFF LAKE State NJ Zip Code 07677-8220
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PSYCHOTHERAPIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60445
Amount of Each Receipt this Period 75.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CAROL LUTZ
Full Name (Last, First, Middle Initial)
Mailing Address 72 PINECREST DRIVE
City WOODCLIFF LAKE State NJ Zip Code 07677-8220
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation PSYCHOTHERAPIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 04 / 06 / 2015
Transaction ID : SA11.79795
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES LYNDE
Full Name (Last, First, Middle Initial)
Mailing Address 3306 FULLER AVE SE
City GRAND RAPIDS State MI Zip Code 49508-2496
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.55371
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... 125.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 344 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES LYNDE
Full Name (Last, First, Middle Initial)

Mailing Address 3306 FULLER AVE SE

City GRAND RAPIDS State MI Zip Code 49508-2496

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2015
Transaction ID : SA11.59538

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES LYNDE
Full Name (Last, First, Middle Initial)

Mailing Address 3306 FULLER AVE SE

City GRAND RAPIDS State MI Zip Code 49508-2496

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.63361

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES LYNDE
Full Name (Last, First, Middle Initial)

Mailing Address 3306 FULLER AVE SE

City GRAND RAPIDS State MI Zip Code 49508-2496

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71348

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 345 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES LYNDE
Full Name (Last, First, Middle Initial)
Mailing Address 3306 FULLER AVE SE
City GRAND RAPIDS State MI Zip Code 49508-2496
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **06 / 05 / 2015**
Transaction ID : SA11.76119
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES LYNDE
Full Name (Last, First, Middle Initial)
Mailing Address 3306 FULLER AVE SE
City GRAND RAPIDS State MI Zip Code 49508-2496
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **04 / 05 / 2015**
Transaction ID : SA11.79559
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JIM LYTELL
Full Name (Last, First, Middle Initial)
Mailing Address 18301 GLADES FARM RD
City ESTERO State FL Zip Code 33928-9606
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation SELF
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 06 / 2015**
Transaction ID : SA11.57816
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **150.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 346 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JIM LYTELL
Full Name (Last, First, Middle Initial)
Mailing Address 18301 GLADES FARM RD
City ESTERO State FL Zip Code 33928-9606
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation SELF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79081
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JIM LYTELL
Full Name (Last, First, Middle Initial)
Mailing Address 18301 GLADES FARM RD
City ESTERO State FL Zip Code 33928-9606
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation SELF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83589
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLENN MACEY
Full Name (Last, First, Middle Initial)
Mailing Address 8136 E. CORTEZ DR.
City SCOTTSDALE State AZ Zip Code 85260-5653
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 13 / 2015
Transaction ID : SA11.73807
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 347 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GLENN MACEY
Full Name (Last, First, Middle Initial)
Mailing Address 8136 E. CORTEZ DR.
City SCOTTSDALE State AZ Zip Code 85260-5653
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 15 / 2015
Transaction ID : SA11.74113
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GLENN MACEY
Full Name (Last, First, Middle Initial)
Mailing Address 8136 E. CORTEZ DR.
City SCOTTSDALE State AZ Zip Code 85260-5653
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 15 / 2015
Transaction ID : SA11.81198
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GLENN MACEY
Full Name (Last, First, Middle Initial)
Mailing Address 8136 E. CORTEZ DR.
City SCOTTSDALE State AZ Zip Code 85260-5653
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 28 / 2015
Transaction ID : SA11.84405
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 348 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LELA E. MADERA
Full Name (Last, First, Middle Initial)

Mailing Address 187 GEORGE STRAIT

City CANYON LAKE State TX Zip Code 78133-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED RANCHER Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11.65353

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LELA E. MADERA
Full Name (Last, First, Middle Initial)

Mailing Address 187 GEORGE STRAIT

City CANYON LAKE State TX Zip Code 78133-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED RANCHER Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2015
Transaction ID : SA11.76388

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS MADISON SR.
Full Name (Last, First, Middle Initial)

Mailing Address 57 FRANKLIN AVENUE

City BINGHAMTON State NY Zip Code 13901-1751

FEC ID number of contributing federal political committee. **C**

Name of Employer T.J. MADISON CONSTRUCTION CO., INC Occupation PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.64921

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 349 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. M. A. MAEDGEN JR.
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11.55531

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. M. A. MAEDGEN JR.
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11.65405

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. M. A. MAEDGEN JR.
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015

Transaction ID : SA11.72377

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 350 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. M. A. MAEDGEN JR.
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015

Transaction ID : SA11.75093

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. M. A. MAEDGEN JR.
Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 87

City MATHIS State TX Zip Code 78368-0087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation AG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 17 / 2015

Transaction ID : SA11.81383

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EVELYN MALPASS
Full Name (Last, First, Middle Initial)

Mailing Address 21330 N. COBURG ROAD

City HARRISBURG State OR Zip Code 97446-9747

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11.55616

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EVELYN MALPASS
Full Name (Last, First, Middle Initial)
Mailing Address 21330 N. COBURG ROAD

City HARRISBURG	State OR	Zip Code 97446-9747
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.62879

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EVELYN MALPASS
Full Name (Last, First, Middle Initial)
Mailing Address 21330 N. COBURG ROAD

City HARRISBURG	State OR	Zip Code 97446-9747
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79978

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT MANIERI
Full Name (Last, First, Middle Initial)
Mailing Address 901 COPPERFIELD TER

City CASSELBERRY	State FL	Zip Code 32707-5829
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer KELLER WILLIAMS REALTY	Occupation REALTOR
--------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.58210

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 352 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT MANIERI

Mailing Address 901 COPPERFIELD TER

City State Zip Code
CASSELBERRY FL 32707-5829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KELLER WILLIAMS REALTY REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2015
Transaction ID : SA11.64552

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT MANIERI

Mailing Address 901 COPPERFIELD TER

City State Zip Code
CASSELBERRY FL 32707-5829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KELLER WILLIAMS REALTY REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2015
Transaction ID : SA11.84264

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DONNA MARIANO

Mailing Address 63 DWYER STREET

City State Zip Code
WEST SENECA NY 14224-1113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 23 / 2015
Transaction ID : SA11.62497

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 353 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DONNA MARIANO
Full Name (Last, First, Middle Initial)
Mailing Address 63 DWYER STREET

City WEST SENECA	State NY	Zip Code 14224-1113
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11.62790

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DONNA MARIANO
Full Name (Last, First, Middle Initial)
Mailing Address 63 DWYER STREET

City WEST SENECA	State NY	Zip Code 14224-1113
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.62839

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONNA MARIANO
Full Name (Last, First, Middle Initial)
Mailing Address 63 DWYER STREET

City WEST SENECA	State NY	Zip Code 14224-1113
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	10	/	2015

Transaction ID : SA11.73322

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 355 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUTH MARK
Full Name (Last, First, Middle Initial)
Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59793

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUTH MARK
Full Name (Last, First, Middle Initial)
Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.62952

Amount of Each Receipt this Period

5.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUTH MARK
Full Name (Last, First, Middle Initial)
Mailing Address 1811 WOODGATE DRIVE

City GOSHEN	State IN	Zip Code 46526-6456
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63485

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 356 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACQUELINE MAROOF
Full Name (Last, First, Middle Initial)

Mailing Address 294 WESTVIEW TERRACE

City ARLINGTON State TX Zip Code 76013-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTHWEST AIRLINES Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA11.56423

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JACQUELINE MAROOF
Full Name (Last, First, Middle Initial)

Mailing Address 294 WESTVIEW TERRACE

City ARLINGTON State TX Zip Code 76013-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer SOUTHWEST AIRLINES Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 02 / 2015
Transaction ID : SA11.60105

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KENNETH MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 125 COOLIDGE AVE, #310

City WATERTOWN State MA Zip Code 02472-2874

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.57735

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 225.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 358 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 125 COOLIDGE AVE, #310

City WATERTOWN State MA Zip Code 02472-2874

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 25 / 2015
Transaction ID : SA11.81910

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 125 COOLIDGE AVE, #310

City WATERTOWN State MA Zip Code 02472-2874

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.84825

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. L. A. MARSHA, JR.
Full Name (Last, First, Middle Initial)

Mailing Address 5655 PINEBRANCH RD.

City COLUMBIA State SC Zip Code 29206-1502

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation WHOLESALE/EXPORT- TEXTILES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57589

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 360 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. L. A. MARSHA, JR.
Full Name (Last, First, Middle Initial)

Mailing Address 5655 PINEBRANCH RD.

City COLUMBIA	State SC	Zip Code 29206-1502
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WHOLESALE/EXPORT- TEXTILES
--------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84380

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALVARO MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH	State FL	Zip Code 33016-6618
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.59247

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALVARO MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH	State FL	Zip Code 33016-6618
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61494

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 361 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALVARO MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH State FL Zip Code 33016-6618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA11.62714

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALVARO MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH State FL Zip Code 33016-6618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2015
Transaction ID : SA11.64546

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALVARO MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 15948 NW 82ND PLACE

City HIALEAH State FL Zip Code 33016-6618

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71381

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 363 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEFFREY MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 125 STANFORD

City SAN ANTONIO State TX Zip Code 78212-2009

FEC ID number of contributing federal political committee. **C**

Name of Employer PVA Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11.76146

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEFFREY MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 125 STANFORD

City SAN ANTONIO State TX Zip Code 78212-2009

FEC ID number of contributing federal political committee. **C**

Name of Employer PVA Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2015

Transaction ID : SA11.81454

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THELMA J. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 8014 N. CIRCLE DR.

City HOUSTON State TX Zip Code 77071-3603

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11.58526

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 364 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DEBBIE MARUSH
Full Name (Last, First, Middle Initial)
Mailing Address 1570 BAY BLVD

City ATLANTIC BEACH	State NY	Zip Code 11509-1606
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation R.N.
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59903

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM MARX
Full Name (Last, First, Middle Initial)
Mailing Address 1509 SOUTHWICK ROAD

City VIRGINIA BEACH	State VA	Zip Code 23451-5965
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NEXCOM	Occupation BUYER
----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.56219

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM MARX
Full Name (Last, First, Middle Initial)
Mailing Address 1509 SOUTHWICK ROAD

City VIRGINIA BEACH	State VA	Zip Code 23451-5965
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NEXCOM	Occupation BUYER
----------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA11.65438

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 366 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL State MT Zip Code 59044-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.56005

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL State MT Zip Code 59044-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 25 / 2015
Transaction ID : SA11.56987

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL State MT Zip Code 59044-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2015
Transaction ID : SA11.59597

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 367 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL	State MT	Zip Code 59044-1701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2015

Transaction ID : SA11.63790

Amount of Each Receipt this Period

10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL	State MT	Zip Code 59044-1701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : SA11.72836

Amount of Each Receipt this Period

10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL	State MT	Zip Code 59044-1701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : SA11.80497

Amount of Each Receipt this Period

25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 368 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. RAMIN MASSING

Mailing Address 1007 5TH.AVE.

City LAUREL	State MT	Zip Code 59044-1701
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83141

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. GILBERT MATHEWS

Mailing Address P.O. BOX 911

City BURNSVILLE	State MN	Zip Code 55337-0911
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61118

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. GILBERT MATHEWS

Mailing Address P.O. BOX 911

City BURNSVILLE	State MN	Zip Code 55337-0911
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61598

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 369 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GILBERT MATHEWS
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 911

City BURNSVILLE	State MN	Zip Code 55337-0911
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Date of Receipt
MM / DD / YYYY
05 / 22 / 2015
Transaction ID : SA11.75380

Amount of Each Receipt this Period
900.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT MATOKA
Full Name (Last, First, Middle Initial)
Mailing Address 140 PERRYVISTA AVE

City PITTSBURGH	State PA	Zip Code 15237-4852
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation BOOKKEEPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Date of Receipt
MM / DD / YYYY
04 / 01 / 2015
Transaction ID : SA11.78421

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW

City ATLANTA	State GA	Zip Code 30327-3718
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Date of Receipt
MM / DD / YYYY
02 / 25 / 2015
Transaction ID : SA11.56952

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 370 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 03 / 2015
Transaction ID : SA11.57359
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71394
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11.76189
Amount of Each Receipt this Period 35.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 371 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 30 / 2015
Transaction ID : SA11.77667
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA11.80187
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY J MAY
Full Name (Last, First, Middle Initial)
Mailing Address 4380 SUMMER LANE NW
City ATLANTA State GA Zip Code 30327-3718
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOMEMAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83001
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 372 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1809 HAWTHORN DRIVE

City RICHMOND	State TX	Zip Code 77469-4821
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation NONE
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.56339

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60795

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61126

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 373 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61618

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64706

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.65459

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 374 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2015

Transaction ID : SA11.76659

Amount of Each Receipt this Period

255.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWIN MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 1604 W. ESCALON

City FRESNO	State CA	Zip Code 93711-1938
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer M.D.	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83548

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES MC DONALD
Full Name (Last, First, Middle Initial)
Mailing Address 8778 DUNBLANE COURT

City TALLAHASSEE	State GA	Zip Code 30024-
---------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MCDONALD & ASSOCIATES, P.C.	Occupation CPA
-------------------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83645

Amount of Each Receipt this Period

250.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 375 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. PAULINE MCATEE

Mailing Address 509 COUNTY ROAD 704

City State Zip Code
JOSHUA TX 76058-5518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015

Transaction ID : **SA11.60414**

Amount of Each Receipt this Period
70.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LUCY MCBAIN

Mailing Address 47100 W. ELDORADO DR.

City State Zip Code
INDIAN WELLS CA 92210-8653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2015

Transaction ID : **SA11.55376**

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LUCY MCBAIN

Mailing Address 47100 W. ELDORADO DR.

City State Zip Code
INDIAN WELLS CA 92210-8653

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2015

Transaction ID : **SA11.59521**

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 376 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LUCY MCBAIN
Full Name (Last, First, Middle Initial)
Mailing Address 47100 W. ELDORADO DR.
City INDIAN WELLS State CA Zip Code 92210-8653
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.63241
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LUCY MCBAIN
Full Name (Last, First, Middle Initial)
Mailing Address 47100 W. ELDORADO DR.
City INDIAN WELLS State CA Zip Code 92210-8653
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71398
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LUCY MCBAIN
Full Name (Last, First, Middle Initial)
Mailing Address 47100 W. ELDORADO DR.
City INDIAN WELLS State CA Zip Code 92210-8653
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 05 / 2015
Transaction ID : SA11.76058
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 377 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LUCY MCBAIN
Full Name (Last, First, Middle Initial)
Mailing Address 47100 W. ELDORADO DR.
City INDIAN WELLS State CA Zip Code 92210-8653
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **04 / 05 / 2015**
Transaction ID : SA11.79449
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LAURA MCCARTHY
Full Name (Last, First, Middle Initial)
Mailing Address 100 SONORA STREET
City NEWPORT BEACH State CA Zip Code 92663-1741
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED RN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.55081
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LAURA MCCARTHY
Full Name (Last, First, Middle Initial)
Mailing Address 100 SONORA STREET
City NEWPORT BEACH State CA Zip Code 92663-1741
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED RN
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.60614
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	160.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 378 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LAURA MCCARTHY

Mailing Address 109 SONORA STREET

City State Zip Code
NEWPORT BEACH CA 92663-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 06 / 2015
Transaction ID : SA11.63606

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LAURA MCCARTHY

Mailing Address 109 SONORA STREET

City State Zip Code
NEWPORT BEACH CA 92663-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA11.64890

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LAURA MCCARTHY

Mailing Address 109 SONORA STREET

City State Zip Code
NEWPORT BEACH CA 92663-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
05 / 21 / 2015
Transaction ID : SA11.75104

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 379 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LAURA MCCARTHY

Mailing Address 109 SONORA STREET

City State Zip Code
NEWPORT BEACH CA 92663-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
06 / 16 / 2015

Transaction ID : SA11.77058

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LAURA MCCARTHY

Mailing Address 109 SONORA STREET

City State Zip Code
NEWPORT BEACH CA 92663-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
04 / 27 / 2015

Transaction ID : SA11.83454

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. SCOTT MCGEE

Mailing Address 44 ROUVILLE AVE

City State Zip Code
GARDNER MA 01440-3567

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MILTON CAT SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
01 / 05 / 2015

Transaction ID : SA11.54115

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **125.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 380 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SCOTT MCGEE
Full Name (Last, First, Middle Initial)
Mailing Address 44 ROUVILLE AVE

City GARDNER	State MA	Zip Code 01440-3567
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MILTON CAT	Occupation SALES
--------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.55368

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SCOTT MCGEE
Full Name (Last, First, Middle Initial)
Mailing Address 44 ROUVILLE AVE

City GARDNER	State MA	Zip Code 01440-3567
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MILTON CAT	Occupation SALES
--------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63318

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SCOTT MCGEE
Full Name (Last, First, Middle Initial)
Mailing Address 44 ROUVILLE AVE

City GARDNER	State MA	Zip Code 01440-3567
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MILTON CAT	Occupation SALES
--------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71409

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 381 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SCOTT MCGEE
Full Name (Last, First, Middle Initial)
Mailing Address 44 ROUVILLE AVE

City GARDNER	State MA	Zip Code 01440-3567
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MILTON CAT	Occupation SALES
--------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		05		2015

Transaction ID : SA11.76050

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SCOTT MCGEE
Full Name (Last, First, Middle Initial)
Mailing Address 44 ROUVILLE AVE

City GARDNER	State MA	Zip Code 01440-3567
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MILTON CAT	Occupation SALES
--------------------------------	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2015

Transaction ID : SA11.79523

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN MCKAY
Full Name (Last, First, Middle Initial)
Mailing Address 2231 SW 43 TER

City FT LAUDERDALE	State FL	Zip Code 33317-6633
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		05		2015

Transaction ID : SA11.71417

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 382 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN MCKAY
Full Name (Last, First, Middle Initial)
Mailing Address 2231 SW 43 TER

City FT LAUDERDALE	State FL	Zip Code 33317-6633
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2015
Transaction ID : SA11.74618

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN MCKAY
Full Name (Last, First, Middle Initial)
Mailing Address 2231 SW 43 TER

City FT LAUDERDALE	State FL	Zip Code 33317-6633
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : SA11.83307

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SHERRY MCKEAN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 9254

City AMARILLO	State TX	Zip Code 79105-9254
FEC ID number of contributing federal political committee. C		
Name of Employer INDIAN INK LEASING INC.	Occupation SELF EMPLOYED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2015
Transaction ID : SA11.59003

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 383 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SHERRY MCKEAN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9254

City AMARILLO State TX Zip Code 79105-9254

FEC ID number of contributing federal political committee. **C**

Name of Employer INDIAN INK LEASING INC. Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.77752

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN MCKINLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 RILMAN LAKE CT

City ATLANTA State GA Zip Code 30327-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND BANK Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015
Transaction ID : SA11.56553

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN MCKINLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 RILMAN LAKE CT

City ATLANTA State GA Zip Code 30327-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND BANK Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : SA11.61288

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 384 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN MCKINLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 RILMAN LAKE CT

City ATLANTA State GA Zip Code 30327-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND BANK Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2015

Transaction ID : SA11.63838

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN MCKINLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 RILMAN LAKE CT

City ATLANTA State GA Zip Code 30327-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND BANK Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : SA11.64883

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN MCKINLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 RILMAN LAKE CT

City ATLANTA State GA Zip Code 30327-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer BRAND BANK Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.71420

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 385 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEPHEN MCNULTY
Full Name (Last, First, Middle Initial)

Mailing Address 680 SOUTH EATON COURT

City LAKE FOREST State IL Zip Code 60045-4846

FEC ID number of contributing federal political committee. **C**

Name of Employer SIGMATRON Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 15 / 2015
Transaction ID : SA11.76823

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. STEPHEN MCNULTY
Full Name (Last, First, Middle Initial)

Mailing Address 680 SOUTH EATON COURT

City LAKE FOREST State IL Zip Code 60045-4846

FEC ID number of contributing federal political committee. **C**

Name of Employer SIGMATRON Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA11.81362

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. STEPHEN MCNULTY
Full Name (Last, First, Middle Initial)

Mailing Address 680 SOUTH EATON COURT

City LAKE FOREST State IL Zip Code 60045-4846

FEC ID number of contributing federal political committee. **C**

Name of Employer SIGMATRON Occupation SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 25 / 2015
Transaction ID : SA11.81922

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 386 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOANNA MCPARTLIN
Full Name (Last, First, Middle Initial)
Mailing Address 5250 HORIZON DR.
City MALIBU State CA Zip Code 90265-3736
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt: **03 / 26 / 2015**
Transaction ID : SA11.65365
Amount of Each Receipt this Period: **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOANNA MCPARTLIN
Full Name (Last, First, Middle Initial)
Mailing Address 5250 HORIZON DR.
City MALIBU State CA Zip Code 90265-3736
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt: **04 / 29 / 2015**
Transaction ID : SA11.85062
Amount of Each Receipt this Period: **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUBEN A MENDIOLA JR
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 566300
City MIAMI State FL Zip Code 33256-6300
FEC ID number of contributing federal political committee. **C**
Name of Employer: **DEALRNFA, INC** Occupation: **PRESIDENT**
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt: **04 / 15 / 2015**
Transaction ID : SA11.81201
Amount of Each Receipt this Period: **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **450.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 387 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NORMAN MERRIAM
Full Name (Last, First, Middle Initial)
Mailing Address 4212 CLIFF ST.
City LARAMIE State WY Zip Code 82070-5321
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **425.00**

Date of Receipt **02 / 10 / 2015**
Transaction ID : SA11.55931
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN MEYER
Full Name (Last, First, Middle Initial)
Mailing Address 4617 AMBERLEY DRIVE
City BIRMINGHAM State AL Zip Code 35242-7588
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. COURTS Occupation RETIRED FROM U. S. COURTS
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11.84422
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID MICHAEL
Full Name (Last, First, Middle Initial)
Mailing Address 3406 MARYWOOD DR
City SPRING State TX Zip Code 77388-5176
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **225.00**

Date of Receipt **02 / 16 / 2015**
Transaction ID : SA11.56301
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 388 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID MICHAEL
Full Name (Last, First, Middle Initial)

Mailing Address 3406 MARYWOOD DR

City SPRING State TX Zip Code 77388-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11.56612

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID MICHAEL
Full Name (Last, First, Middle Initial)

Mailing Address 3406 MARYWOOD DR

City SPRING State TX Zip Code 77388-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.57570

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID MICHAEL
Full Name (Last, First, Middle Initial)

Mailing Address 3406 MARYWOOD DR

City SPRING State TX Zip Code 77388-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60324

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DAVID MICHAEL

Mailing Address 3406 MARYWOOD DR

City SPRING State TX Zip Code 77388-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SA11.77838

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DAVID MICHAEL

Mailing Address 3406 MARYWOOD DR

City SPRING State TX Zip Code 77388-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2015

Transaction ID : SA11.78828

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. GORDON R MILLER

Mailing Address 14289 W SHELLEY LANE

City WADSWORTH State IL Zip Code 60083-9550

FEC ID number of contributing federal political committee. **C**

Name of Employer REAL MFG CONSULTING Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SA11.59722

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 390 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHAEL MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 123 WEST MAIN ST

City BARRINGTON State IL Zip Code 60010-4302

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation JEWELER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2015
Transaction ID : SA11.79958

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHAEL MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 123 WEST MAIN ST

City BARRINGTON State IL Zip Code 60010-4302

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation JEWELER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83488

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PAUL MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 678

City MADILL State OK Zip Code 73446-0678

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2015
Transaction ID : SA11.58258

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 391 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PAUL MITCHELL
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 678

City MADILL	State OK	Zip Code 73446-0678
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : SA11.72848

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PAUL MITCHELL
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 678

City MADILL	State OK	Zip Code 73446-0678
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79971

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PAUL MITCHELL
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 678

City MADILL	State OK	Zip Code 73446-0678
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83329

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 392 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54351

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2015
Transaction ID : SA11.56177

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : SA11.57331

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 393 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2015
Transaction ID : SA11.57893

Amount of Each Receipt this Period
 15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.59799

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY State IN Zip Code 47116-9325

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED SOLDIER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 457.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.61660

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 394 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY	State IN	Zip Code 47116-9325
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED SOLDIER
-----------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	26	/	2015

Transaction ID : SA11.65349

Amount of Each Receipt this Period

65	34	90	00
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15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY	State IN	Zip Code 47116-9325
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED SOLDIER
-----------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79889

Amount of Each Receipt this Period

79	88	90	00
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25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLIAM E MITCHELL
Full Name (Last, First, Middle Initial)

Mailing Address 6069 W GOVERNORS TRACE

City ECKERTY	State IN	Zip Code 47116-9325
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED SOLDIER
-----------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
457.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81566

Amount of Each Receipt this Period

81	56	60	00
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25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>65</td><td>34</td><td>90</td><td>00</td></tr></table>	65	34	90	00
65	34	90	00		
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td>65</td><td>34</td><td>90</td><td>00</td></tr></table>	65	34	90	00
65	34	90	00		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 395 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARILYN MITSCH
Full Name (Last, First, Middle Initial)

Mailing Address 4 CHARLEY LAKE COURT

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58214

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARILYN MITSCH
Full Name (Last, First, Middle Initial)

Mailing Address 4 CHARLEY LAKE COURT

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 14 / 2015
Transaction ID : SA11.64478

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RONALD MITSCH
Full Name (Last, First, Middle Initial)

Mailing Address 4 CHARLEY LAKE CT.

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71446

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 396 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RONALD MITSCH
Full Name (Last, First, Middle Initial)

Mailing Address 4 CHARLEY LAKE CT.

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.71447

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RONALD MITSCH
Full Name (Last, First, Middle Initial)

Mailing Address 4 CHARLEY LAKE CT.

City NORTH OAKS State MN Zip Code 55127-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11.83597

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN MIZERAS
Full Name (Last, First, Middle Initial)

Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE State NC Zip Code 28791-

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015

Transaction ID : SA11.55927

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 397 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
-------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11.57070

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
-------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.58555

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
-------------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.59950

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 398 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.60511

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
02 / 18 / 2015
Transaction ID : SA11.62245

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
02 / 19 / 2015
Transaction ID : SA11.62299

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 399 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
03 / 04 / 2015
Transaction ID : SA11.63171

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
03 / 06 / 2015
Transaction ID : SA11.63471

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015
Transaction ID : SA11.64576

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 400 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
05 / 21 / 2015
Transaction ID : SA11.75116

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
06 / 05 / 2015
Transaction ID : SA11.76310

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN MIZERAS
Full Name (Last, First, Middle Initial)
Mailing Address 4.0609509015E+015

City 78 BROGDEN LANE	State NC	Zip Code 28791-
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015
Transaction ID : SA11.77451

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 401 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2015

Transaction ID : SA11.54130

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54735

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.57316

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 402 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59729

Amount of Each Receipt this Period

215.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.59959

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE MOORE
Full Name (Last, First, Middle Initial)
Mailing Address 305 MONARCH COVE

City CEDAR PARK	State TX	Zip Code 78613-2106
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MOORE AND ASSOCIATES	Occupation SELF
------------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.63189

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. DIANE MOORE		Date of Receipt MM / DD / YYYY 03 / 25 / 2015 Transaction ID : SA11.65707
Mailing Address 305 MONARCH COVE		Amount of Each Receipt this Period 10.00
City CEDAR PARK State TX Zip Code 78613-2106	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MOORE AND ASSOCIATES Occupation SELF	Aggregate Year-to-Date 215.00	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DIANE MOORE		Date of Receipt MM / DD / YYYY 04 / 28 / 2015 Transaction ID : SA11.84064
Mailing Address 305 MONARCH COVE		Amount of Each Receipt this Period 25.00
City CEDAR PARK State TX Zip Code 78613-2106	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MOORE AND ASSOCIATES Occupation SELF	Aggregate Year-to-Date 215.00	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LEN MOORE		Date of Receipt MM / DD / YYYY 03 / 06 / 2015 Transaction ID : SA11.63614
Mailing Address 16650 SCHOENBORN ST.		Amount of Each Receipt this Period 100.00
City NORTH HILLS State CA Zip Code 91343-6106	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer MOORE INDUSTRIES Occupation ENGR.	Aggregate Year-to-Date 250.00	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 404 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LEON MORGAN

Mailing Address 43 FOREST BROOK ROAD

City State Zip Code
GUILFORD CT 06437-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2015

Transaction ID : **SA11.55014**

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LEON MORGAN

Mailing Address 43 FOREST BROOK ROAD

City State Zip Code
GUILFORD CT 06437-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 16 / 2015

Transaction ID : **SA11.56285**

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LEON MORGAN

Mailing Address 43 FOREST BROOK ROAD

City State Zip Code
GUILFORD CT 06437-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 25 / 2015

Transaction ID : **SA11.56964**

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 405 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.57440

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59863

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63536

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 406 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2015

Transaction ID : SA11.63781

Amount of Each Receipt this Period

600	.	00
-----	---	----

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83364

Amount of Each Receipt this Period

600	.	00
-----	---	----

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEON MORGAN
Full Name (Last, First, Middle Initial)
Mailing Address 43 FOREST BROOK ROAD

City GUILFORD	State CT	Zip Code 06437-2245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

Transaction ID : SA11.85262

Amount of Each Receipt this Period

600	.	00
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25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>600</td><td>.</td><td>00</td></tr></table>	600	.	00
600	.	00		
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td>600</td><td>.</td><td>00</td></tr></table>	600	.	00
600	.	00		

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 407 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PATRICK MURPHY
Full Name (Last, First, Middle Initial)
Mailing Address W267N2899 WOODLAND DR

City PEWAUKEE	State WI	Zip Code 53072-4474
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation HEALTH CARE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61902

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PATRICK MURPHY
Full Name (Last, First, Middle Initial)
Mailing Address W267N2899 WOODLAND DR

City PEWAUKEE	State WI	Zip Code 53072-4474
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation HEALTH CARE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SA11.65235

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PATRICK MURPHY
Full Name (Last, First, Middle Initial)
Mailing Address W267N2899 WOODLAND DR

City PEWAUKEE	State WI	Zip Code 53072-4474
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation HEALTH CARE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71476

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 408 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARIA NAGY

Mailing Address 2500 PARKVIEW DRIVE
2207

City HALLANDALE BEACH State FL Zip Code 33009-2885

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation CHEMIST (RET)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
03 / 03 / 2015
Transaction ID : SA11.57360

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARIA NAGY

Mailing Address 2500 PARKVIEW DRIVE
2207

City HALLANDALE BEACH State FL Zip Code 33009-2885

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation CHEMIST (RET)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
03 / 16 / 2015
Transaction ID : SA11.58917

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MARIA NAGY

Mailing Address 2500 PARKVIEW DRIVE
2207

City HALLANDALE BEACH State FL Zip Code 33009-2885

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation CHEMIST (RET)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
04 / 04 / 2015
Transaction ID : SA11.79307

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 409 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARIA NAGY

Mailing Address 2500 PARKVIEW DRIVE
2207

City HALLANDALE BEACH State FL Zip Code 33009-2885

FEC ID number of contributing federal political committee. **C**

Name of Employer PFIZER Occupation CHEMIST (RET)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
04 / 28 / 2015
Transaction ID : SA11.84337

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ALBERT NAKATA

Mailing Address 1304 RUBIO VISTA ROAD

City ALTADENA State CA Zip Code 91001-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
03 / 19 / 2015
Transaction ID : SA11.59268

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ALBERT NAKATA

Mailing Address 1304 RUBIO VISTA ROAD

City ALTADENA State CA Zip Code 91001-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
01 / 28 / 2015
Transaction ID : SA11.59871

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 411 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALBERT NAKATA
Full Name (Last, First, Middle Initial)

Mailing Address 1304 RUBIO VISTA ROAD

City ALTADENA State CA Zip Code 91001-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **04 / 26 / 2015**

Transaction ID : SA11.82239

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALBERT NAKATA
Full Name (Last, First, Middle Initial)

Mailing Address 1304 RUBIO VISTA ROAD

City ALTADENA State CA Zip Code 91001-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **04 / 27 / 2015**

Transaction ID : SA11.83295

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT NAPPI
Full Name (Last, First, Middle Initial)

Mailing Address 384 EAGLE DRIVE

City JUPITER State FL Zip Code 33477-4066

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SELF-EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **02 / 04 / 2015**

Transaction ID : SA11.60512

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 413 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARGARET NICHOLS
Full Name (Last, First, Middle Initial)
Mailing Address 9 HERITAGE LANE

City SCARBOROUGH	State ME	Zip Code 04074-9785
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63359

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARGARET NICHOLS
Full Name (Last, First, Middle Initial)
Mailing Address 9 HERITAGE LANE

City SCARBOROUGH	State ME	Zip Code 04074-9785
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.63994

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11.56747

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 414 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	09	/	2015

Transaction ID : SA11.61408

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.62185

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.62573

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	95.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 415 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63597

Amount of Each Receipt this Period

100.00	100.00	100.00	100.00	100.00
				50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71500

Amount of Each Receipt this Period

100.00	100.00	100.00	100.00	100.00
				25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DONALD NORBURY
Full Name (Last, First, Middle Initial)
Mailing Address 1414 SE 28TH COURT

City OCALA	State FL	Zip Code 34471-4738
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2015

Transaction ID : SA11.73119

Amount of Each Receipt this Period

100.00	100.00	100.00	100.00	100.00
				25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 416 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DONALD NORBURY

Mailing Address 1414 SE 28TH COURT

City Ocala State FL Zip Code 34471-4738

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **05 / 14 / 2015**

Transaction ID : SA11.73958

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DONALD NORBURY

Mailing Address 1414 SE 28TH COURT

City Ocala State FL Zip Code 34471-4738

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **05 / 20 / 2015**

Transaction ID : SA11.74650

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DONALD NORBURY

Mailing Address 1414 SE 28TH COURT

City Ocala State FL Zip Code 34471-4738

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **06 / 15 / 2015**

Transaction ID : SA11.76857

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **60.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 418 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA	State CA	Zip Code 95336-9144
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.60024

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA	State CA	Zip Code 95336-9144
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61434

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA	State CA	Zip Code 95336-9144
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2015

Transaction ID : SA11.63754

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 419 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA State CA Zip Code 95336-9144

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11.73626

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA State CA Zip Code 95336-9144

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2015

Transaction ID : SA11.76839

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JON NORLING
Full Name (Last, First, Middle Initial)

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA State CA Zip Code 95336-9144

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.80174

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 420 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JON NORLING

Mailing Address 1060 BUTTERCUP PLACE

City MANTECA State CA Zip Code 95336-9144

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **05 / 01 / 2015**

Transaction ID : SA11.85264

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. TAMMY NORRIS

Mailing Address 46 WHITE PLAINS DR

City JACKSON State TN Zip Code 38305-7328

FEC ID number of contributing federal political committee. **C**

Name of Employer WADE NORRIS LOGGING LLC Occupation BUSINESS MGR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt **04 / 27 / 2015**

Transaction ID : SA11.83431

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. CARL O'BERRY

Mailing Address 10159 N 119TH PLACE

City SCOTTSDALE State AZ Zip Code 85259-5075

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **725.00**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11.62810

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **175.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 421 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CARL O'BERRY
Full Name (Last, First, Middle Initial)
Mailing Address 10159 N 119TH PLACE

City SCOTTSDALE	State AZ	Zip Code 85259-5075
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77420

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HARVEY ORLIN
Full Name (Last, First, Middle Initial)
Mailing Address 2 WINDSOR DRIVE

City OLD WESTBURY	State NY	Zip Code 11568-1529
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71528

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HARVEY ORLIN
Full Name (Last, First, Middle Initial)
Mailing Address 2 WINDSOR DRIVE

City OLD WESTBURY	State NY	Zip Code 11568-1529
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71529

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 422 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. HARVEY ORLIN
Full Name (Last, First, Middle Initial)
Mailing Address 2 WINDSOR DRIVE

City OLD WESTBURY	State NY	Zip Code 11568-1529
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2015

Transaction ID : SA11.79071

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HARVEY ORLIN
Full Name (Last, First, Middle Initial)
Mailing Address 2 WINDSOR DRIVE

City OLD WESTBURY	State NY	Zip Code 11568-1529
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2015

Transaction ID : SA11.79074

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HARVEY ORLIN
Full Name (Last, First, Middle Initial)
Mailing Address 2 WINDSOR DRIVE

City OLD WESTBURY	State NY	Zip Code 11568-1529
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation PHYSICIAN
--------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : SA11.84106

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 423 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARYGINA ORTIZ
Full Name (Last, First, Middle Initial)

Mailing Address 188 STEADWELL RD

City AMSTERDAM	State NY	Zip Code 12010-7507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE PROFESSIONAL
-----------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57263

Amount of Each Receipt this Period

250.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARYGINA ORTIZ
Full Name (Last, First, Middle Initial)

Mailing Address 188 STEADWELL RD

City AMSTERDAM	State NY	Zip Code 12010-7507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE PROFESSIONAL
-----------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.65190

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARYGINA ORTIZ
Full Name (Last, First, Middle Initial)

Mailing Address 188 STEADWELL RD

City AMSTERDAM	State NY	Zip Code 12010-7507
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE PROFESSIONAL
-----------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72462

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 425 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH OTT
Full Name (Last, First, Middle Initial)
Mailing Address 118 N THIRD ST

City TIPP CITY	State OH	Zip Code 45371-1916
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71533

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH OTT
Full Name (Last, First, Middle Initial)
Mailing Address 118 N THIRD ST

City TIPP CITY	State OH	Zip Code 45371-1916
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77561

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KENNETH OTT
Full Name (Last, First, Middle Initial)
Mailing Address 118 N THIRD ST

City TIPP CITY	State OH	Zip Code 45371-1916
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79415

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 426 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROYCE OWENS
Full Name (Last, First, Middle Initial)
Mailing Address 1107 NARCILLE STREET
City BAYTOWN State TX Zip Code 77520-5702
FEC ID number of contributing federal political committee. **C**
Name of Employer NOT A CHANCE! Occupation RETIRED!
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2015
Transaction ID : SA11.63619
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANNE PADGETT
Full Name (Last, First, Middle Initial)
Mailing Address 10803 BURGOYNE ROAD
City HOUSTON State TX Zip Code 77042-2719
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF - PADGETT EXPLORATION Occupation GEOPHYSICAL CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA11.54562
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANNE PADGETT
Full Name (Last, First, Middle Initial)
Mailing Address 10803 BURGOYNE ROAD
City HOUSTON State TX Zip Code 77042-2719
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF - PADGETT EXPLORATION Occupation GEOPHYSICAL CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57587
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 427 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANNE PADGETT
Full Name (Last, First, Middle Initial)
Mailing Address 10803 BURGOYNE ROAD

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - PADGETT EXPLORATION	Occupation GEOPHYSICAL CONSULTANT
------------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.59021

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANNE PADGETT
Full Name (Last, First, Middle Initial)
Mailing Address 10803 BURGOYNE ROAD

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - PADGETT EXPLORATION	Occupation GEOPHYSICAL CONSULTANT
------------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.59275

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANNE PADGETT
Full Name (Last, First, Middle Initial)
Mailing Address 10803 BURGOYNE ROAD

City HOUSTON	State TX	Zip Code 77042-2719
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF - PADGETT EXPLORATION	Occupation GEOPHYSICAL CONSULTANT
------------------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2015

Transaction ID : SA11.75398

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 428 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54355

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2015
Transaction ID : SA11.58000

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.58903

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 429 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11.62204

Amount of Each Receipt this Period
 15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.63882

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : SA11.75140

Amount of Each Receipt this Period
 15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 430 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARY PADILLA

Mailing Address 179 LA MEDIA RD SW

City ALBUQUERQUE State NM Zip Code 87105-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.78382

Amount of Each Receipt this Period
 200.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. SHERWOOD PARKHURST

Mailing Address 3920 E. PIONEER ROAD

City ROGERSVILLE State MO Zip Code 65742-9494

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60819

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. SHERWOOD PARKHURST

Mailing Address 3920 E. PIONEER ROAD

City ROGERSVILLE State MO Zip Code 65742-9494

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : SA11.65186

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 431 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SHERWOOD PARKHURST
Full Name (Last, First, Middle Initial)
Mailing Address 3920 E. PIONEER ROAD

City ROGERSVILLE	State MO	Zip Code 65742-9494
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2015

Transaction ID : SA11.65678

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SHERWOOD PARKHURST
Full Name (Last, First, Middle Initial)
Mailing Address 3920 E. PIONEER ROAD

City ROGERSVILLE	State MO	Zip Code 65742-9494
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79395

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MICHAEL PARR
Full Name (Last, First, Middle Initial)
Mailing Address 2426 NW MILL POND RD

City PORTLAND	State OR	Zip Code 97229-7536
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CASCADE	Occupation DISTRIBUTION
-----------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.76976

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 432 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHAEL PARR
Full Name (Last, First, Middle Initial)
Mailing Address 2426 NW MILL POND RD
City PORTLAND State OR Zip Code 97229-7536
FEC ID number of contributing federal political committee. **C**
Name of Employer CASCADE Occupation DISTRIBUTION
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 04 / 08 / 2015
Transaction ID : SA11.80380
Amount of Each Receipt this Period 20.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHAEL PARR
Full Name (Last, First, Middle Initial)
Mailing Address 2426 NW MILL POND RD
City PORTLAND State OR Zip Code 97229-7536
FEC ID number of contributing federal political committee. **C**
Name of Employer CASCADE Occupation DISTRIBUTION
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 04 / 17 / 2015
Transaction ID : SA11.81372
Amount of Each Receipt this Period 30.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEANNE PATRICK
Full Name (Last, First, Middle Initial)
Mailing Address 14606 BERRY CIR
City OMAHA State NE Zip Code 68137-2566
FEC ID number of contributing federal political committee. **C**
Name of Employer N P DODGE COMPANY Occupation REAL ESTATE SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.54994
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 433 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEANNE PATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 14606 BERRY CIR

City OMAHA State NE Zip Code 68137-2566

FEC ID number of contributing federal political committee. **C**

Name of Employer N P DODGE COMPANY Occupation REAL ESTATE SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.60049

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEANNE PATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 14606 BERRY CIR

City OMAHA State NE Zip Code 68137-2566

FEC ID number of contributing federal political committee. **C**

Name of Employer N P DODGE COMPANY Occupation REAL ESTATE SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71549

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)

Mailing Address 3848 WINFORD DRIVE

City TARZANA State CA Zip Code 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2015
Transaction ID : SA11.54133

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 434 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2015
Transaction ID : SA11.54162

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2015
Transaction ID : SA11.55747

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2015
Transaction ID : SA11.56702

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. MARTHA PAULISSIAN

Mailing Address **3848 WINFORD DRIVE**

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
03 / 10 / 2015

Transaction ID : SA11.58274

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MARTHA PAULISSIAN

Mailing Address **3848 WINFORD DRIVE**

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
03 / 13 / 2015

Transaction ID : SA11.58530

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. MARTHA PAULISSIAN

Mailing Address **3848 WINFORD DRIVE**

City State Zip Code
TARZANA CA 91356-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt
01 / 18 / 2015

Transaction ID : SA11.59554

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 436 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.62059

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2015

Transaction ID : SA11.62485

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2015

Transaction ID : SA11.62737

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 437 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : SA11.63136

Amount of Each Receipt this Period

925.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63584

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64904

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 438 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2015

Transaction ID : SA11.65253

Amount of Each Receipt this Period

925.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2015

Transaction ID : SA11.75923

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2015

Transaction ID : SA11.77267

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 439 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80339

Amount of Each Receipt this Period

925.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2015

Transaction ID : SA11.80763

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN

Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81260

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 440 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2015

Transaction ID : SA11.81713

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2015

Transaction ID : SA11.81720

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE

City TARZANA	State CA	Zip Code 91356-5823
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83327

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 441 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARTHA PAULISSIAN
Full Name (Last, First, Middle Initial)
Mailing Address 3848 WINFORD DRIVE
City TARZANA State CA Zip Code 91356-5823
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **925.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11.84221
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE
City TORRANCE State CA Zip Code 90501-6045
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **465.00**

Date of Receipt **02 / 19 / 2015**
Transaction ID : SA11.56637
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE
City TORRANCE State CA Zip Code 90501-6045
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **465.00**

Date of Receipt **02 / 04 / 2015**
Transaction ID : SA11.60669
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **45.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 442 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2015

Transaction ID : SA11.61772

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.62072

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2015

Transaction ID : SA11.62209

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 443 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT PAULSON
Full Name (Last, First, Middle Initial)

Mailing Address 2133 W. 235TH PLACE

City TORRANCE State CA Zip Code 90501-6045

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11.62214

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT PAULSON
Full Name (Last, First, Middle Initial)

Mailing Address 2133 W. 235TH PLACE

City TORRANCE State CA Zip Code 90501-6045

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2015

Transaction ID : SA11.63014

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT PAULSON
Full Name (Last, First, Middle Initial)

Mailing Address 2133 W. 235TH PLACE

City TORRANCE State CA Zip Code 90501-6045

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015

Transaction ID : SA11.73126

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 444 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74668

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79824

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT PAULSON
Full Name (Last, First, Middle Initial)
Mailing Address 2133 W. 235TH PLACE

City TORRANCE	State CA	Zip Code 90501-6045
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80071

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								1	0

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>6</td><td>0</td></tr></table> 60.00	6	5	4	3	2	1	0	.	0	0									6	0
6	5	4	3	2	1	0	.	0	0												
								6	0												
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	6	5	4	3	2	1	0	.	0	0										
6	5	4	3	2	1	0	.	0	0												

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 445 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT PAULSON

Mailing Address 2133 W. 235TH PLACE

City State Zip Code
TORRANCE CA 90501-6045

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015
Transaction ID : SA11.83317

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. CLARK PEALE

Mailing Address 135 OVERLOOK AVE

City State Zip Code
LEONIA NJ 07605-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
01 / 19 / 2015
Transaction ID : SA11.54152

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. CLARK PEALE

Mailing Address 135 OVERLOOK AVE

City State Zip Code
LEONIA NJ 07605-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2015
Transaction ID : SA11.57154

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 446 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE

City LEONIA	State NJ	Zip Code 07605-1550
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57507

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE

City LEONIA	State NJ	Zip Code 07605-1550
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	24	/	2015

Transaction ID : SA11.59384

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE

City LEONIA	State NJ	Zip Code 07605-1550
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60868

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 447 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE
City LEONIA State NJ Zip Code 07605-1550
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt **02 / 21 / 2015**
Transaction ID : SA11.62473
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE
City LEONIA State NJ Zip Code 07605-1550
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt **05 / 07 / 2015**
Transaction ID : SA11.72864
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CLARK PEALE
Full Name (Last, First, Middle Initial)
Mailing Address 135 OVERLOOK AVE
City LEONIA State NJ Zip Code 07605-1550
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 335.00

Date of Receipt **05 / 09 / 2015**
Transaction ID : SA11.73276
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 448 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CLARK PEALE

Mailing Address 135 OVERLOOK AVE

City LEONIA State NJ Zip Code 07605-1550

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt **06 / 16 / 2015**

Transaction ID : SA11.77077

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JOHN PECK

Mailing Address P.O. BOX 829

City RANCHO SANTA FE State CA Zip Code 92067-0829

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3100.00**

Date of Receipt **01 / 28 / 2015**

Transaction ID : SA11.59910

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. JOHN PECK

Mailing Address P.O. BOX 829

City RANCHO SANTA FE State CA Zip Code 92067-0829

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3100.00**

Date of Receipt **06 / 12 / 2015**

Transaction ID : SA11.76604

Amount of Each Receipt this Period **2500.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	2625.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 449 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MILDRED PEERY
Full Name (Last, First, Middle Initial)
Mailing Address 2200 COWPER

City PALO ALTO	State CA	Zip Code 94301-4112
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.57101

Amount of Each Receipt this Period

250.00	50.00
--------	-------

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANNE PELLISSIER
Full Name (Last, First, Middle Initial)
Mailing Address 1515 SHASTA DR.

City DAVIS	State CA	Zip Code 95616-6691
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.55483

Amount of Each Receipt this Period

100.00	100.00
--------	--------

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANNE PELLISSIER
Full Name (Last, First, Middle Initial)
Mailing Address 1515 SHASTA DR.

City DAVIS	State CA	Zip Code 95616-6691
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.56514

Amount of Each Receipt this Period

100.00	100.00
--------	--------

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 450 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANNE PELLISSIER
Full Name (Last, First, Middle Initial)
Mailing Address 1515 SHASTA DR.
City DAVIS State CA Zip Code 95616-6691
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58211
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANNE PELLISSIER
Full Name (Last, First, Middle Initial)
Mailing Address 1515 SHASTA DR.
City DAVIS State CA Zip Code 95616-6691
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 350.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61661
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICK PENDLETON
Full Name (Last, First, Middle Initial)
Mailing Address 35829 OAK SPRINGS RD.
City TOLLHOUSE State CA Zip Code 93667-9611
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ARCHITECT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83643
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 400.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 451 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JAMES PETE

Mailing Address 77 TALBOT CT

City MEDIA State PA Zip Code 19063-5527

FEC ID number of contributing federal political committee. **C**

Name of Employer HANOVER INSURANCE GROUP Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015

Transaction ID : SA11.84423

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT PHIPPS

Mailing Address 80 MAIN STREET

City HOPKINTON State MA Zip Code 01748-1177

FEC ID number of contributing federal political committee. **C**

Name of Employer PAUL M PHIPPS INSURANCE AGENCY, INC. Occupation BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2015

Transaction ID : SA11.77022

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DORIS PINSLEY

Mailing Address 17 HARBOR DRIVE

City RUMSON State NJ Zip Code 07760-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2015

Transaction ID : SA11.54103

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	510.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 452 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57214

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.62492

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63237

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 453 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64627

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.65481

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DORIS PINSLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17 HARBOR DRIVE

City RUMSON	State NJ	Zip Code 07760-1018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71573

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 454 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial)
DORIS PINSLEY

Mailing Address **17 HARBOR DRIVE**

City **RUMSON** State **NJ** Zip Code **07760-1018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 05 / 2015

Transaction ID : SA11.76046

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. Full Name (Last, First, Middle Initial)
DORIS PINSLEY

Mailing Address **17 HARBOR DRIVE**

City **RUMSON** State **NJ** Zip Code **07760-1018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2015

Transaction ID : SA11.79442

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. Full Name (Last, First, Middle Initial)
ANTHONY POGODZINSKI

Mailing Address **9609 MANITOU PARK DR**

City **MINOCQUA** State **WI** Zip Code **54548-9362**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NA** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2015

Transaction ID : SA11.61439

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 455 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANTHONY POGODZINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9609 MANITOU PARK DR
 City State Zip Code
 MINOCQUA WI 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11.62309
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ANTHONY POGODZINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9609 MANITOU PARK DR
 City State Zip Code
 MINOCQUA WI 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2015
Transaction ID : SA11.65160
 Amount of Each Receipt this Period
 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ANTHONY POGODZINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9609 MANITOU PARK DR
 City State Zip Code
 MINOCQUA WI 54548-9362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NA RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.74677
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 456 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ANTHONY POGODZINSKI
Full Name (Last, First, Middle Initial)

Mailing Address 9609 MANITOU PARK DR

City MINOCQUA State WI Zip Code 54548-9362

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt **04 / 23 / 2015**

Transaction ID : SA11.81694

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EARL POIRIER
Full Name (Last, First, Middle Initial)

Mailing Address 19987-182 AVE NW

City BIG LAKE State MN Zip Code 55309-

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **03 / 14 / 2015**

Transaction ID : SA11.58580

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EARL POIRIER
Full Name (Last, First, Middle Initial)

Mailing Address 19987-182 AVE NW

City BIG LAKE State MN Zip Code 55309-

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation NONE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **02 / 16 / 2015**

Transaction ID : SA11.61971

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 457 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2015

Transaction ID : SA11.62312

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11.62807

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.63889

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 458 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
03 / 19 / 2015
Transaction ID : SA11.65129

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
04 / 06 / 2015
Transaction ID : SA11.79757

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EARL POIRIER
Full Name (Last, First, Middle Initial)
Mailing Address 19987-182 AVE NW

City BIG LAKE	State MN	Zip Code 55309-
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015
Transaction ID : SA11.82810

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 460 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LUE POWERS
Full Name (Last, First, Middle Initial)
Mailing Address 410 S. BC AVE.
City LYNDEN State WA Zip Code 98264-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.58201
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LUE POWERS
Full Name (Last, First, Middle Initial)
Mailing Address 410 S. BC AVE.
City LYNDEN State WA Zip Code 98264-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 14 / 2015
Transaction ID : SA11.58634
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LUE POWERS
Full Name (Last, First, Middle Initial)
Mailing Address 410 S. BC AVE.
City LYNDEN State WA Zip Code 98264-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60506
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 461 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LUE POWERS
Full Name (Last, First, Middle Initial)
Mailing Address 410 S. BC AVE.
City LYNDEN State WA Zip Code 98264-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **02 / 19 / 2015**
Transaction ID : SA11.62319
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LUE POWERS
Full Name (Last, First, Middle Initial)
Mailing Address 410 S. BC AVE.
City LYNDEN State WA Zip Code 98264-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation HOME MAKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 13 / 2015**
Transaction ID : SA11.73822
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN PRATT
Full Name (Last, First, Middle Initial)
Mailing Address 1479 SW SHORELINE DRIVE
City PALM CITY State FL Zip Code 34990-4535
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **700.00**

Date of Receipt **05 / 05 / 2015**
Transaction ID : SA11.71581
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **150.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 463 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN PRATT
Full Name (Last, First, Middle Initial)

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY State FL Zip Code 34990-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
04 / 12 / 2015
Transaction ID : SA11.80936

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN PRATT
Full Name (Last, First, Middle Initial)

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY State FL Zip Code 34990-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
04 / 28 / 2015
Transaction ID : SA11.84302

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN PRATT
Full Name (Last, First, Middle Initial)

Mailing Address 1479 SW SHORELINE DRIVE

City PALM CITY State FL Zip Code 34990-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
04 / 28 / 2015
Transaction ID : SA11.84379

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 464 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)
Mailing Address 105 GARLAND LANE

City WEST GARDINER	State ME	Zip Code 04345-3389
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation MAINE GUIDE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.58576

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)
Mailing Address 105 GARLAND LANE

City WEST GARDINER	State ME	Zip Code 04345-3389
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation MAINE GUIDE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.62073

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)
Mailing Address 105 GARLAND LANE

City WEST GARDINER	State ME	Zip Code 04345-3389
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation MAINE GUIDE
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64705

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	▶	30.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 465 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 105 GARLAND LANE

City WEST GARDINER State ME Zip Code 04345-3389

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation MAINE GUIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2015

Transaction ID : SA11.74196

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 105 GARLAND LANE

City WEST GARDINER State ME Zip Code 04345-3389

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation MAINE GUIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2015

Transaction ID : SA11.77446

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 105 GARLAND LANE

City WEST GARDINER State ME Zip Code 04345-3389

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation MAINE GUIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.80295

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 466 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)
Mailing Address 105 GARLAND LANE
City WEST GARDINER State ME Zip Code 04345-3389
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation MAINE GUIDE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 22 / 2015
Transaction ID : SA11.81534
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RALPH PRESCOTT
Full Name (Last, First, Middle Initial)
Mailing Address 105 GARLAND LANE
City WEST GARDINER State ME Zip Code 04345-3389
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation MAINE GUIDE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.82825
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LENORA H PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 W. SUNFLOWER DRIVE
City PAYSON State AZ Zip Code 85541-6152
FEC ID number of contributing federal political committee. **C**
Name of Employer EUCLID, OH BD OF EDUCATION Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1735.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.55363
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 467 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LENORA H PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 W. SUNFLOWER DRIVE

City PAYSON	State AZ	Zip Code 85541-6152
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EUCLID, OH BD OF EDUCATION	Occupation RETIRED
------------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.59542

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LENORA H PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 W. SUNFLOWER DRIVE

City PAYSON	State AZ	Zip Code 85541-6152
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EUCLID, OH BD OF EDUCATION	Occupation RETIRED
------------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63375

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LENORA H PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 W. SUNFLOWER DRIVE

City PAYSON	State AZ	Zip Code 85541-6152
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer EUCLID, OH BD OF EDUCATION	Occupation RETIRED
------------------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1735.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71590

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 468 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LENORA H PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 W. SUNFLOWER DRIVE
City PAYSON State AZ Zip Code 85541-6152
FEC ID number of contributing federal political committee. **C**
Name of Employer EUCLID, OH BD OF EDUCATION Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1735.00

Date of Receipt 04 / 05 / 2015
Transaction ID : SA11.79568
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LENORA PUSTA
Full Name (Last, First, Middle Initial)
Mailing Address 138 WEST SUNFLOWER DRIVE
City PAYSON State AZ Zip Code 85541-6152
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 06 / 2015
Transaction ID : SA11.79983
Amount of Each Receipt this Period 1000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2096
City CLOVIS State CA Zip Code 93613-2096
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 05 / 2015
Transaction ID : SA11.54116
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 1125.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 469 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2096

City CLOVIS State CA Zip Code 93613-2096

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 05 / 2015

Transaction ID : SA11.55372

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2096

City CLOVIS State CA Zip Code 93613-2096

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2015

Transaction ID : SA11.57534

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2096

City CLOVIS State CA Zip Code 93613-2096

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SA11.71593

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ **75.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 470 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2096

City CLOVIS	State CA	Zip Code 93613-2096
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
06 / 05 / 2015
Transaction ID : SA11.76055

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLOTTE RACKLEY
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2096

City CLOVIS	State CA	Zip Code 93613-2096
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
04 / 05 / 2015
Transaction ID : SA11.79524

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN RAINONE
Full Name (Last, First, Middle Initial)
Mailing Address 12 LANDERS RD.

City READING	State MA	Zip Code 01867-1233
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
03 / 10 / 2015
Transaction ID : SA11.64107

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 471 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN RAINONE
Full Name (Last, First, Middle Initial)
Mailing Address 12 LANDERS RD.
City READING State MA Zip Code 01867-1233
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71595
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN RAINONE
Full Name (Last, First, Middle Initial)
Mailing Address 12 LANDERS RD.
City READING State MA Zip Code 01867-1233
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 21 / 2015
Transaction ID : SA11.75167
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN RAINONE
Full Name (Last, First, Middle Initial)
Mailing Address 12 LANDERS RD.
City READING State MA Zip Code 01867-1233
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79067
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 472 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DICK RANDALL
Full Name (Last, First, Middle Initial)
Mailing Address 22348 REGNART RD
City CUPERTINO State CA Zip Code 95014-4825
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 03 / 05 / 2015
Transaction ID : SA11.57595
Amount of Each Receipt this Period 1000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DICK RANDALL
Full Name (Last, First, Middle Initial)
Mailing Address 22348 REGNART RD
City CUPERTINO State CA Zip Code 95014-4825
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60443
Amount of Each Receipt this Period 500.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DICK RANDALL
Full Name (Last, First, Middle Initial)
Mailing Address 22348 REGNART RD
City CUPERTINO State CA Zip Code 95014-4825
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 04 / 01 / 2015
Transaction ID : SA11.78422
Amount of Each Receipt this Period 1000.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 2500.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 473 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DICK RANDALL
Full Name (Last, First, Middle Initial)
Mailing Address 22348 REGNART RD
City CUPERTINO State CA Zip Code 95014-4825
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **3500.00**

Date of Receipt **04 / 07 / 2015**
Transaction ID : SA11.80359
Amount of Each Receipt this Period **1000.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KAKARALA RAO
Full Name (Last, First, Middle Initial)
Mailing Address 630,103RD AVE N
City NAPLES State FL Zip Code 34108-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer US GOVERNMENT Occupation PHYSICIAN RTD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **215.00**

Date of Receipt **03 / 20 / 2015**
Transaction ID : SA11.59296
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KAKARALA RAO
Full Name (Last, First, Middle Initial)
Mailing Address 630,103RD AVE N
City NAPLES State FL Zip Code 34108-3219
FEC ID number of contributing federal political committee. **C**
Name of Employer US GOVERNMENT Occupation PHYSICIAN RTD
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **215.00**

Date of Receipt **02 / 05 / 2015**
Transaction ID : SA11.60921
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	1020.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 474 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH RASCH
Full Name (Last, First, Middle Initial)

Mailing Address 1834 JOHNSON AVE

City FORT DODGE State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer RASCH FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2015
Transaction ID : SA11.57253

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH RASCH
Full Name (Last, First, Middle Initial)

Mailing Address 1834 JOHNSON AVE

City FORT DODGE State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer RASCH FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.65606

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KENNETH RASCH
Full Name (Last, First, Middle Initial)

Mailing Address 1834 JOHNSON AVE

City FORT DODGE State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer RASCH FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.65611

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 475 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KENNETH RASCH
Full Name (Last, First, Middle Initial)

Mailing Address 1834 JOHNSON AVE

City FORT DODGE State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer RASCH FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **05 / 12 / 2015**
Transaction ID : **SA11.73657**

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KENNETH RASCH
Full Name (Last, First, Middle Initial)

Mailing Address 1834 JOHNSON AVE

City FORT DODGE State IA Zip Code 50501-8572

FEC ID number of contributing federal political committee. **C**

Name of Employer RASCH FARMS Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **04 / 03 / 2015**
Transaction ID : **SA11.78595**

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES RATHBONE
Full Name (Last, First, Middle Initial)

Mailing Address 940 NE RAVEN CT.

City BEND State OR Zip Code 97701-8816

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **01 / 28 / 2015**
Transaction ID : **SA11.59895**

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **85.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 476 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES RATHBONE
Full Name (Last, First, Middle Initial)
Mailing Address 940 NE RAVEN CT.
City BEND State OR Zip Code 97701-8816
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 02 / 24 / 2015
Transaction ID : SA11.62622
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60365
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 02 / 25 / 2015
Transaction ID : SA11.62688
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 477 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **03 / 05 / 2015**
Transaction ID : SA11.63352
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **03 / 11 / 2015**
Transaction ID : SA11.64204
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **05 / 21 / 2015**
Transaction ID : SA11.75173
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **75.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 478 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA11.80190
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALAN D. REED
Full Name (Last, First, Middle Initial)
Mailing Address 123 N. SCOTT RD.
City FORT WAYNE State IN Zip Code 46814-8722
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INS. AGT/BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 04 / 23 / 2015
Transaction ID : SA11.81711
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EUGENE RHODES
Full Name (Last, First, Middle Initial)
Mailing Address 3900 PARK GREEN DR.
City CORONA DEL MAR State CA Zip Code 92625-1612
FEC ID number of contributing federal political committee. **C**
Name of Employer RHODESDEVELOPMENT CO. Occupation REAL ESTATE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 01 / 28 / 2015
Transaction ID : SA11.54446
Amount of Each Receipt this Period 500.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... 550.00
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 479 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN RINNE
Full Name (Last, First, Middle Initial)

Mailing Address 1803 N WAKONDA ST

City FLAGSTAFF State AZ Zip Code 86004-7262

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.54566

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN RINNE
Full Name (Last, First, Middle Initial)

Mailing Address 1803 N WAKONDA ST

City FLAGSTAFF State AZ Zip Code 86004-7262

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA11.62841

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN RINNE
Full Name (Last, First, Middle Initial)

Mailing Address 1803 N WAKONDA ST

City FLAGSTAFF State AZ Zip Code 86004-7262

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2015
Transaction ID : SA11.62979

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 480 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN RINNE
Full Name (Last, First, Middle Initial)

Mailing Address 1803 N WAKONDA ST

City FLAGSTAFF State AZ Zip Code 86004-7262

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015
Transaction ID : SA11.65623

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City GENESEO State IL Zip Code 61254-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2015
Transaction ID : SA11.54121

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City GENESEO State IL Zip Code 61254-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11.55374

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 481 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City GENESEO	State IL	Zip Code 61254-1156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2015

Transaction ID : SA11.57593

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City GENESEO	State IL	Zip Code 61254-1156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.71633

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City GENESEO	State IL	Zip Code 61254-1156
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2015

Transaction ID : SA11.76128

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 482 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City State Zip Code
GENESEO IL 61254-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2015

Transaction ID : SA11.79088

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 830 ORIOLE CT.

City State Zip Code
GENESEO IL 61254-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1525.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2015

Transaction ID : SA11.79571

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARK RODACK
Full Name (Last, First, Middle Initial)

Mailing Address 16051 COLLINS AVE

City State Zip Code
SUNNY ISLES BEACH FL 33160-4505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : SA11.73977

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 483 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARK RODACK
Full Name (Last, First, Middle Initial)
Mailing Address 16051 COLLINS AVE

City SUNNY ISLES BEACH	State FL	Zip Code 33160-4505
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74705

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARK RODACK
Full Name (Last, First, Middle Initial)
Mailing Address 16051 COLLINS AVE

City SUNNY ISLES BEACH	State FL	Zip Code 33160-4505
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2015

Transaction ID : SA11.80940

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JON ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 1731 AVIATION BLVD

City LINCOLN	State CA	Zip Code 95648-9317
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RFC	Occupation MANAGER
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60200

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 484 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JON ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 1731 AVIATION BLVD

City LINCOLN	State CA	Zip Code 95648-9317
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RFC	Occupation MANAGER
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63608

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JON ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 1731 AVIATION BLVD

City LINCOLN	State CA	Zip Code 95648-9317
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RFC	Occupation MANAGER
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.79006

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JON ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 1731 AVIATION BLVD

City LINCOLN	State CA	Zip Code 95648-9317
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RFC	Occupation MANAGER
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80314

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 485 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JON ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 1731 AVIATION BLVD
City LINCORN State CA Zip Code 95648-9317
FEC ID number of contributing federal political committee. **C**
Name of Employer RFC Occupation MANAGER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **550.00**

Date of Receipt **04 / 27 / 2015**
Transaction ID : SA11.83424
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KATHLEEN ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 5730 WIGTON
City HOUSTON State TX Zip Code 77096-4821
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **03 / 13 / 2015**
Transaction ID : SA11.58520
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KATHLEEN ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 5730 WIGTON
City HOUSTON State TX Zip Code 77096-4821
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **03 / 26 / 2015**
Transaction ID : SA11.65358
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **100.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 486 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. KATHLEEN ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 5730 WIGTON

City HOUSTON	State TX	Zip Code 77096-4821
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015
Transaction ID : SA11.71645

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. KATHLEEN ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 5730 WIGTON

City HOUSTON	State TX	Zip Code 77096-4821
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
04 / 04 / 2015
Transaction ID : SA11.79413

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. KATHLEEN ROGERS
Full Name (Last, First, Middle Initial)
Mailing Address 5730 WIGTON

City HOUSTON	State TX	Zip Code 77096-4821
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015
Transaction ID : SA11.83483

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 487 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JESSE RUF
Full Name (Last, First, Middle Initial)

Mailing Address 20525 NORDHOFF STREET
SUITE 210

City CHATSWORTH State CA Zip Code 91311-6135

FEC ID number of contributing federal political committee. **C**

Name of Employer LUMBER CITY CORP. Occupation CEO/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2015

Transaction ID : SA11.62136

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JESSE RUF
Full Name (Last, First, Middle Initial)

Mailing Address 20525 NORDHOFF STREET
SUITE 210

City CHATSWORTH State CA Zip Code 91311-6135

FEC ID number of contributing federal political committee. **C**

Name of Employer LUMBER CITY CORP. Occupation CEO/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2015

Transaction ID : SA11.65447

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JESSE RUF
Full Name (Last, First, Middle Initial)

Mailing Address 20525 NORDHOFF STREET
SUITE 210

City CHATSWORTH State CA Zip Code 91311-6135

FEC ID number of contributing federal political committee. **C**

Name of Employer LUMBER CITY CORP. Occupation CEO/OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2015

Transaction ID : SA11.81276

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 488 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALEXANDRA RUKEYSER
Full Name (Last, First, Middle Initial)

Mailing Address 1131 ALTA LOMA ROAD

City WEST HOLLYWOOD State CA Zip Code 90069-2459

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED AS I AM 80 YEARS OLD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2015
Transaction ID : SA11.81636

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.54534

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2015
Transaction ID : SA11.57186

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 489 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : SA11.75190

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : SA11.75418

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.77880

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 490 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2015
Transaction ID : SA11.79882

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2015
Transaction ID : SA11.82249

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NICHOLAS RUSSAK
Full Name (Last, First, Middle Initial)

Mailing Address 685 NW PERSIMMON PL

City BEAVERTON State OR Zip Code 97006-8390

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83384

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 491 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD RUSSELL
Full Name (Last, First, Middle Initial)
Mailing Address 5 LIGADURA LANE

City HOT SPRINGS VILLAG	State AR	Zip Code 71909-5462
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.55169

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD RUSSELL
Full Name (Last, First, Middle Initial)
Mailing Address 5 LIGADURA LANE

City HOT SPRINGS VILLAG	State AR	Zip Code 71909-5462
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57542

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD RUSSELL
Full Name (Last, First, Middle Initial)
Mailing Address 5 LIGADURA LANE

City HOT SPRINGS VILLAG	State AR	Zip Code 71909-5462
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57770

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 493 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PAUL RYDEN
Full Name (Last, First, Middle Initial)
Mailing Address 8701 LOMAS AZULES PLACE

City SAN JOSE	State CA	Zip Code 95135-2129
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.58986

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PAUL RYDEN
Full Name (Last, First, Middle Initial)
Mailing Address 8701 LOMAS AZULES PLACE

City SAN JOSE	State CA	Zip Code 95135-2129
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.61163

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PAUL RYDEN
Full Name (Last, First, Middle Initial)
Mailing Address 8701 LOMAS AZULES PLACE

City SAN JOSE	State CA	Zip Code 95135-2129
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71662

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 494 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT SALA
Full Name (Last, First, Middle Initial)

Mailing Address 2 MOONLIGHT DRIVE

City BARNEGAT State NJ Zip Code 08005-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN AIRLINES Occupation PILOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2015
Transaction ID : SA11.58614

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT SALA
Full Name (Last, First, Middle Initial)

Mailing Address 2 MOONLIGHT DRIVE

City BARNEGAT State NJ Zip Code 08005-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN AIRLINES Occupation PILOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11.62340

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT SALA
Full Name (Last, First, Middle Initial)

Mailing Address 2 MOONLIGHT DRIVE

City BARNEGAT State NJ Zip Code 08005-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN AIRLINES Occupation PILOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2015
Transaction ID : SA11.73983

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 495 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT SALA

Mailing Address **2 MOONLIGHT DRIVE**

City BARNEGAT	State NJ	Zip Code 08005-1171
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN AIRLINES	Occupation PILOT
----------------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 20 / 2015

Transaction ID : SA11.74717

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT SALA

Mailing Address **2 MOONLIGHT DRIVE**

City BARNEGAT	State NJ	Zip Code 08005-1171
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AMERICAN AIRLINES	Occupation PILOT
----------------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 09 / 2015

Transaction ID : SA11.80513

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. RAYMOND SALZMAN

Mailing Address **11151 RAWHIODE RD.**

City LUSBY	State MD	Zip Code 20657-3183
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
03 / 05 / 2015

Transaction ID : SA11.63363

Amount of Each Receipt this Period
30.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 496 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
FEC ID number of contributing federal political committee. C		
Name of Employer RET.	Occupation RET.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Date of Receipt
MM / DD / YYYY
01 / 27 / 2015
Transaction ID : SA11.54257

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
FEC ID number of contributing federal political committee. C		
Name of Employer RET.	Occupation RET.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.54908

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
FEC ID number of contributing federal political committee. C		
Name of Employer RET.	Occupation RET.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.00	

Date of Receipt
MM / DD / YYYY
02 / 10 / 2015
Transaction ID : SA11.55814

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 497 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
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FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57222

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.59983

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61881

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 498 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72531

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74722

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2015

Transaction ID : SA11.75623

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	30.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 499 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.78538

Amount of Each Receipt this Period

4	.	0	0
10.00			

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80203

Amount of Each Receipt this Period

2	.	5	0
25.00			

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : SA11.81145

Amount of Each Receipt this Period

1	.	0	0
10.00			

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 500 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2015

Transaction ID : SA11.81607

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2015

Transaction ID : SA11.81784

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALLACE SAUNDERS
Full Name (Last, First, Middle Initial)
Mailing Address 624 HAWK RUN

City O FALLON	State MO	Zip Code 63368-8185
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83040

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 501 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. GERALD SCHLIEF		Date of Receipt MM / DD / YYYY 04 / 03 / 2015 Transaction ID : SA11.79075
Mailing Address 5773 WOODWAY DR.		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77057-1501
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. GERALD SCHLIEF		Date of Receipt MM / DD / YYYY 04 / 07 / 2015 Transaction ID : SA11.80350
Mailing Address 5773 WOODWAY DR.		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77057-1501
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. GERALD SCHLIEF		Date of Receipt MM / DD / YYYY 04 / 22 / 2015 Transaction ID : SA11.81611
Mailing Address 5773 WOODWAY DR.		Amount of Each Receipt this Period 50.00
City HOUSTON	State TX	Zip Code 77057-1501
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 502 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT SCHOULTZ
Full Name (Last, First, Middle Initial)
Mailing Address 19231 NO 88TH AVE

City PEORIA	State AZ	Zip Code 85382-8543
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAME	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57796

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT SCHOULTZ
Full Name (Last, First, Middle Initial)
Mailing Address 19231 NO 88TH AVE

City PEORIA	State AZ	Zip Code 85382-8543
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAME	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.60040

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT SCHOULTZ
Full Name (Last, First, Middle Initial)
Mailing Address 19231 NO 88TH AVE

City PEORIA	State AZ	Zip Code 85382-8543
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SAME	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60850

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 504 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CLINTON SCHULZ

Mailing Address 4217 PEACH CREEK CT

City State Zip Code
CORPUS CHRISTI TX 78410-5616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CITGO REFINING & CHEMICALS ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2015
Transaction ID : SA11.62489

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DIANE SCHULTE

Mailing Address 4555 BARBARA AVE E

City State Zip Code
INVER GROVE HEIGHT MN 55077-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2015
Transaction ID : SA11.57365

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DIANE SCHULTE

Mailing Address 4555 BARBARA AVE E

City State Zip Code
INVER GROVE HEIGHT MN 55077-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2015
Transaction ID : SA11.63000

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 505 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E
City INVER GROVE HEIGHT State MN Zip Code 55077-1311
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2015
Transaction ID : SA11.63356
Amount of Each Receipt this Period
350.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E
City INVER GROVE HEIGHT State MN Zip Code 55077-1311
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2015
Transaction ID : SA11.64100
Amount of Each Receipt this Period
35.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E
City INVER GROVE HEIGHT State MN Zip Code 55077-1311
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2015
Transaction ID : SA11.65302
Amount of Each Receipt this Period
50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 506 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E

City INVER GROVE HEIGHT	State MN	Zip Code 55077-1311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80307

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E

City INVER GROVE HEIGHT	State MN	Zip Code 55077-1311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80657

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E

City INVER GROVE HEIGHT	State MN	Zip Code 55077-1311
----------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81277

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 507 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E
City INVER GROVE HEIGHT State MN Zip Code 55077-1311
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 25 / 2015
Transaction ID : SA11.81939
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE SCHULTE
Full Name (Last, First, Middle Initial)
Mailing Address 4555 BARBARA AVE E
City INVER GROVE HEIGHT State MN Zip Code 55077-1311
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 29 / 2015
Transaction ID : SA11.84969
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WL SCHULZ
Full Name (Last, First, Middle Initial)
Mailing Address 7 SPARROW LANE
City NEW ORLEANS State LA Zip Code 70123-2033
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation R/E BROKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11.55478
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 508 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WL SCHULZ
Full Name (Last, First, Middle Initial)
Mailing Address 7 SPARROW LANE

City NEW ORLEANS	State LA	Zip Code 70123-2033
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation R/E BROKER
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : SA11.72895

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WL SCHULZ
Full Name (Last, First, Middle Initial)
Mailing Address 7 SPARROW LANE

City NEW ORLEANS	State LA	Zip Code 70123-2033
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation R/E BROKER
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

Transaction ID : SA11.85268

Amount of Each Receipt this Period

250.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CARL SCIORTINO
Full Name (Last, First, Middle Initial)
Mailing Address 1302 ALSATIA DRIVE

City HENRICO	State VA	Zip Code 23238-5107
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11.56738

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 509 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CARL SCIORTINO
Full Name (Last, First, Middle Initial)

Mailing Address 1302 ALSATIA DRIVE

City HENRICO State VA Zip Code 23238-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.58204

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CARL SCIORTINO
Full Name (Last, First, Middle Initial)

Mailing Address 1302 ALSATIA DRIVE

City HENRICO State VA Zip Code 23238-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : SA11.63127

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CARMELO SCKITTONE
Full Name (Last, First, Middle Initial)

Mailing Address 625 AVE L

City DICKINSON State TX Zip Code 77539-8282

FEC ID number of contributing federal political committee. **C**

Name of Employer STYROLUTION AMERICA Occupation PROCESS OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.57447

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 510 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CARMELO SCKITONE
Full Name (Last, First, Middle Initial)
Mailing Address 625 AVE L
City DICKINSON State TX Zip Code 77539-8282
FEC ID number of contributing federal political committee. **C**
Name of Employer STYROLUTION AMERICA Occupation PROCESS OPERATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 04 / 26 / 2015
Transaction ID : SA11.82288
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CARMELO SCKITONE
Full Name (Last, First, Middle Initial)
Mailing Address 625 AVE L
City DICKINSON State TX Zip Code 77539-8282
FEC ID number of contributing federal political committee. **C**
Name of Employer STYROLUTION AMERICA Occupation PROCESS OPERATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83573
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT SEALE
Full Name (Last, First, Middle Initial)
Mailing Address 6627 WANITA PLACE
City HOUSTON State TX Zip Code 77007-2034
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA11.62098
Amount of Each Receipt this Period 150.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 350.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 511 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT SEALE
Full Name (Last, First, Middle Initial)
Mailing Address 6627 WANITA PLACE

City HOUSTON	State TX	Zip Code 77007-2034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74731

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT SEALE
Full Name (Last, First, Middle Initial)
Mailing Address 6627 WANITA PLACE

City HOUSTON	State TX	Zip Code 77007-2034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2015

Transaction ID : SA11.76414

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT SEALE
Full Name (Last, First, Middle Initial)
Mailing Address 6627 WANITA PLACE

City HOUSTON	State TX	Zip Code 77007-2034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ATTORNEY
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	02	/	2015

Transaction ID : SA11.78427

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 512 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT SEALE

Mailing Address **6627 WANITA PLACE**

City **HOUSTON** State **TX** Zip Code **77007-2034**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt **04 / 27 / 2015**

Transaction ID : SA11.83644

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. SARAH SEALS

Mailing Address **8538 KINGSLEY CIR**

City **GRANBURY** State **TX** Zip Code **76049-4761**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **NOT EMPLOYED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **05 / 23 / 2015**

Transaction ID : SA11.75498

Amount of Each Receipt this Period **25.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. SARAH SEALS

Mailing Address **8538 KINGSLEY CIR**

City **GRANBURY** State **TX** Zip Code **76049-4761**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **NOT EMPLOYED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **04 / 03 / 2015**

Transaction ID : SA11.79015

Amount of Each Receipt this Period **50.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ **325.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 513 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.54937

Amount of Each Receipt this Period

 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11.55367

Amount of Each Receipt this Period

 15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.57474

Amount of Each Receipt this Period

 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> . <input type="text"/> . 35.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/> .

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 514 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	05	/	2015

Transaction ID : SA11.59532

Amount of Each Receipt this Period

15.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2015

Transaction ID : SA11.60947

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PHILLIP SECKER
Full Name (Last, First, Middle Initial)
Mailing Address 3692 E CAMINO DE JAIME

City TUCSON	State AZ	Zip Code 85718-7432
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation SELF EMPLOYED
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
370.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71705

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 516 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DON SENTELL

Mailing Address 5730 CAMERON HALL PLACE

City SANDY SPRINGS	State GA	Zip Code 30328-4896
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	30	/	2015

Transaction ID : SA11.85214

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT SHAFFER

Mailing Address POBOX 295

City CATLETT	State VA	Zip Code 20119-0295
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	15	/	2015

Transaction ID : SA11.64553

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ROBERT SHAFFER

Mailing Address POBOX 295

City CATLETT	State VA	Zip Code 20119-0295
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83557

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 517 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.55205

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015

Transaction ID : SA11.60746

Amount of Each Receipt this Period
 35.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015

Transaction ID : SA11.61503

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 518 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2015

Transaction ID : SA11.61816

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015

Transaction ID : SA11.62330

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11.62511

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 519 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11.62770

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.63312

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015
Transaction ID : SA11.73684

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 520 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015

Transaction ID : SA11.74733

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015

Transaction ID : SA11.78078

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. R. ANNE SHALE
Full Name (Last, First, Middle Initial)

Mailing Address 1104 CHRISTI CIRCLE

City BEAVERCREEK State OH Zip Code 45434-6376

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2015

Transaction ID : SA11.80864

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	40.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 521 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)
Mailing Address 1104 CHRISTI CIRCLE
City BEAVERCREEK State OH Zip Code 45434-6376
FEC ID number of contributing federal political committee. **C**
Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **04 / 21 / 2015**
Transaction ID : SA11.81437
Amount of Each Receipt this Period **20.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. R. ANNE SHALE
Full Name (Last, First, Middle Initial)
Mailing Address 1104 CHRISTI CIRCLE
City BEAVERCREEK State OH Zip Code 45434-6376
FEC ID number of contributing federal political committee. **C**
Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81839
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. R. ANNE SHALE
Full Name (Last, First, Middle Initial)
Mailing Address 1104 CHRISTI CIRCLE
City BEAVERCREEK State OH Zip Code 45434-6376
FEC ID number of contributing federal political committee. **C**
Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **04 / 26 / 2015**
Transaction ID : SA11.82099
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **40.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 522 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. R. ANNE SHALE
Full Name (Last, First, Middle Initial)
Mailing Address 1104 CHRISTI CIRCLE
City BEAVERCREEK State OH Zip Code 45434-6376
FEC ID number of contributing federal political committee. **C**
Name of Employer HOLZFASTER, CECIL, MCKNIGHT & MUES Occupation ATTORNEY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **255.00**

Date of Receipt **04 / 29 / 2015**
Transaction ID : SA11.84709
Amount of Each Receipt this Period **200.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALVAN SHANE
Full Name (Last, First, Middle Initial)
Mailing Address 2270 N EUCLID AVE
City UPLAND State CA Zip Code 91784-1390
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF / BUSINESS MANAGEMENT ASSOCIATES Occupation TAX ACCOUNTANT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1050.00**

Date of Receipt **04 / 29 / 2015**
Transaction ID : SA11.85065
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300
City LUBBOCK State TX Zip Code 79403-7848
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation NONE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **375.00**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11.62768
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **320.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 523 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.62882

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63374

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71719

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 524 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Date of Receipt
05 / 07 / 2015
Transaction ID : SA11.72898

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Date of Receipt
05 / 20 / 2015
Transaction ID : SA11.74734

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)
Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation NONE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Date of Receipt
04 / 03 / 2015
Transaction ID : SA11.79002

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 525 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)

Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80312

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RUSSELL SHANNON
Full Name (Last, First, Middle Initial)

Mailing Address 8407 E CR 6300

City LUBBOCK	State TX	Zip Code 79403-7848
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation NONE
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83437

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES SHAW
Full Name (Last, First, Middle Initial)

Mailing Address 4427 WOODFIELD BL

City BOCA RATON	State FL	Zip Code 33434-5305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60638

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 526 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES SHAW
Full Name (Last, First, Middle Initial)
Mailing Address 4427 WOODFIELD BL
City BOCA RATON State FL Zip Code 33434-5305
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015
Transaction ID : SA11.71723
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SANDRA SHAW
Full Name (Last, First, Middle Initial)
Mailing Address 6234 PARTRIDGE HILL DR.
City MOUNT PLEASANT State WI Zip Code 53406-3480
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2015
Transaction ID : SA11.62053
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SANDRA SHAW
Full Name (Last, First, Middle Initial)
Mailing Address 6234 PARTRIDGE HILL DR.
City MOUNT PLEASANT State WI Zip Code 53406-3480
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2015
Transaction ID : SA11.63123
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 527 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDRA SHAW
Full Name (Last, First, Middle Initial)
Mailing Address 6234 PARTRIDGE HILL DR.
City MOUNT PLEASANT State WI Zip Code 53406-3480
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.63858
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SANDRA SHAW
Full Name (Last, First, Middle Initial)
Mailing Address 6234 PARTRIDGE HILL DR.
City MOUNT PLEASANT State WI Zip Code 53406-3480
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11.63973
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)
Mailing Address 210 E 23 ST
City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431
FEC ID number of contributing federal political committee. **C**
Name of Employer WIFE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 24 / 2015
Transaction ID : SA11.59387
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 528 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015

Transaction ID : SA11.72555

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11.73687

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2015

Transaction ID : SA11.75568

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 529 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2015

Transaction ID : SA11.80910

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2015

Transaction ID : SA11.80917

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2015

Transaction ID : SA11.82213

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 530 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PETER F SHERIDAN
Full Name (Last, First, Middle Initial)

Mailing Address 210 E 23 ST

City LONG BEACH TOWNSHI State NJ Zip Code 08008-2431

FEC ID number of contributing federal political committee. **C**

Name of Employer WIFE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 28 / 2015
Transaction ID : SA11.84142

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PATRICIA SHOCKEY
Full Name (Last, First, Middle Initial)

Mailing Address 39124 HUGHESVILLE ROAD

City LEESBURG State VA Zip Code 20175-6659

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015
Transaction ID : SA11.57594

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JACKIE SIKES
Full Name (Last, First, Middle Initial)

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH State FL Zip Code 32931-3321

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2015
Transaction ID : SA11.57897

Amount of Each Receipt this Period
 20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	295.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 531 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JACKIE SIKES

Mailing Address 420 S. BANANA RIVER BLVD.

City COCOA BEACH	State FL	Zip Code 32931-3321
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.58108

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JEROME SILECCHIA

Mailing Address 55 LENOX ROAD

City ROCKVILLE CENTRE	State NY	Zip Code 11570-5207
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2015

Transaction ID : SA11.72901

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. JEROME SILECCHIA

Mailing Address 55 LENOX ROAD

City ROCKVILLE CENTRE	State NY	Zip Code 11570-5207
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : SA11.73989

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 532 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEROME SILECCHIA
Full Name (Last, First, Middle Initial)
Mailing Address 55 LENOX ROAD

City ROCKVILLE CENTRE	State NY	Zip Code 11570-5207
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74739

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEROME SILECCHIA
Full Name (Last, First, Middle Initial)
Mailing Address 55 LENOX ROAD

City ROCKVILLE CENTRE	State NY	Zip Code 11570-5207
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.79090

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JEROME SILECCHIA
Full Name (Last, First, Middle Initial)
Mailing Address 55 LENOX ROAD

City ROCKVILLE CENTRE	State NY	Zip Code 11570-5207
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation RETIRED
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84293

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 533 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LYNN SILVERNALE
Full Name (Last, First, Middle Initial)

Mailing Address 116 OAK GROVE PKWY

City OROVILLE State CA Zip Code 95966-5753

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.60006

Amount of Each Receipt this Period
 255.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LYNN SILVERNALE
Full Name (Last, First, Middle Initial)

Mailing Address 116 OAK GROVE PKWY

City OROVILLE State CA Zip Code 95966-5753

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71734

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LYNN SILVERNALE
Full Name (Last, First, Middle Initial)

Mailing Address 116 OAK GROVE PKWY

City OROVILLE State CA Zip Code 95966-5753

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2015
Transaction ID : SA11.74740

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 534 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LYNN SILVERNALE
Full Name (Last, First, Middle Initial)
Mailing Address 116 OAK GROVE PKWY

City OROVILLE	State CA	Zip Code 95966-5753
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2015

Transaction ID : SA11.76870

Amount of Each Receipt this Period

255.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LYNN SILVERNALE
Full Name (Last, First, Middle Initial)
Mailing Address 116 OAK GROVE PKWY

City OROVILLE	State CA	Zip Code 95966-5753
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation RETIRED
------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2015

Transaction ID : SA11.81658

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALLEN SIMON
Full Name (Last, First, Middle Initial)
Mailing Address 1383 N CRISS ST

City CHANDLER	State AZ	Zip Code 85226-1307
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61589

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 535 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALLEN SIMON
Full Name (Last, First, Middle Initial)
Mailing Address 1383 N CRISS ST
City CHANDLER State AZ Zip Code 85226-1307
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 875.00

Date of Receipt 02 / 16 / 2015
Transaction ID : SA11.61964
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ALLEN SIMON
Full Name (Last, First, Middle Initial)
Mailing Address 1383 N CRISS ST
City CHANDLER State AZ Zip Code 85226-1307
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 875.00

Date of Receipt 02 / 23 / 2015
Transaction ID : SA11.62488
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ALLEN SIMON
Full Name (Last, First, Middle Initial)
Mailing Address 1383 N CRISS ST
City CHANDLER State AZ Zip Code 85226-1307
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 875.00

Date of Receipt 03 / 07 / 2015
Transaction ID : SA11.63762
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 450.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 536 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ALLEN SIMON

Mailing Address 1383 N CRISS ST

City CHANDLER State AZ Zip Code 85226-1307

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 14 / 2015

Transaction ID : **SA11.73990**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. GEORGE H SINGLETON

Mailing Address P.O. BOX 717

City WAXAHACHIE State TX Zip Code 75168-0717

FEC ID number of contributing federal political committee. **C**

Name of Employer CNB OF TEXAS Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2015

Transaction ID : **SA11.54128**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. GEORGE H SINGLETON

Mailing Address P.O. BOX 717

City WAXAHACHIE State TX Zip Code 75168-0717

FEC ID number of contributing federal political committee. **C**

Name of Employer CNB OF TEXAS Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2015

Transaction ID : **SA11.54445**

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 537 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LESLIE SLOAN

Mailing Address 8300 NORTH FM 620

City AUSTIN State TX Zip Code 78726-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11.83648

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DONALD B SMALLWOOD

Mailing Address 27872 S SATSUMA RD

City LIVINGSTON State LA Zip Code 70754-3115

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED, US ARMY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2015

Transaction ID : SA11.73163

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DONALD B SMALLWOOD

Mailing Address 27872 S SATSUMA RD

City LIVINGSTON State LA Zip Code 70754-3115

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED, US ARMY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2015

Transaction ID : SA11.75429

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 538 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. DONALD B SMALLWOOD		Date of Receipt MM / DD / YYYY 06 / 11 / 2015 Transaction ID : SA11.76592
Mailing Address 27872 S SATSUMA RD		Amount of Each Receipt this Period 100.00
City LIVINGSTON	State LA	Zip Code 70754-3115
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED, US ARMY	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. DONALD B SMALLWOOD		Date of Receipt MM / DD / YYYY 04 / 29 / 2015 Transaction ID : SA11.85046
Mailing Address 27872 S SATSUMA RD		Amount of Each Receipt this Period 100.00
City LIVINGSTON	State LA	Zip Code 70754-3115
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED, US ARMY	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. DONALD B SMALLWOOD		Date of Receipt MM / DD / YYYY 04 / 29 / 2015 Transaction ID : SA11.85047
Mailing Address 27872 S SATSUMA RD		Amount of Each Receipt this Period 100.00
City LIVINGSTON	State LA	Zip Code 70754-3115
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED, US ARMY	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 539 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA SMART
Full Name (Last, First, Middle Initial)
Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE	State IL	Zip Code 60563-4166
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.55139

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA SMART
Full Name (Last, First, Middle Initial)
Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE	State IL	Zip Code 60563-4166
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SA11.56995

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BARBARA SMART
Full Name (Last, First, Middle Initial)
Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE	State IL	Zip Code 60563-4166
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57245

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 540 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA SMART
Full Name (Last, First, Middle Initial)

Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE State IL Zip Code 60563-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 03 / 16 / 2015
Transaction ID : SA11.58804

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA SMART
Full Name (Last, First, Middle Initial)

Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE State IL Zip Code 60563-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 03 / 19 / 2015
Transaction ID : SA11.59194

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BARBARA SMART
Full Name (Last, First, Middle Initial)

Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE State IL Zip Code 60563-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 03 / 03 / 2015
Transaction ID : SA11.63102

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 541 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA SMART
Full Name (Last, First, Middle Initial)

Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE State IL Zip Code 60563-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 14 / 2015
Transaction ID : SA11.64422

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA SMART
Full Name (Last, First, Middle Initial)

Mailing Address 2033 BUTTERFLY LANE

City NAPERVILLE State IL Zip Code 60563-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 05 / 29 / 2015
Transaction ID : SA11.75870

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BERNON SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 621 S RIVER BREEZE DRIVE

City OREM State UT Zip Code 84097-6685

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.54785

Amount of Each Receipt this Period 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 535.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 542 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DANIEL SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 240 SEMINOLE LANE

City GREEN BAY	State WI	Zip Code 54313-4950
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2015

Transaction ID : SA11.57261

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DANIEL SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 240 SEMINOLE LANE

City GREEN BAY	State WI	Zip Code 54313-4950
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60233

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DANIEL SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 240 SEMINOLE LANE

City GREEN BAY	State WI	Zip Code 54313-4950
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83613

Amount of Each Receipt this Period

100.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 543 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 709 BAYLOR BLVD

City BIG SPRING	State TX	Zip Code 79720-3425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. POSTAL SERVICE	Occupation ELECTRONICS TECHNICIAN
-----------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	20	/	2015

Transaction ID : SA11.54156

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 709 BAYLOR BLVD

City BIG SPRING	State TX	Zip Code 79720-3425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. POSTAL SERVICE	Occupation ELECTRONICS TECHNICIAN
-----------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54855

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								1	0

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 709 BAYLOR BLVD

City BIG SPRING	State TX	Zip Code 79720-3425
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. POSTAL SERVICE	Occupation ELECTRONICS TECHNICIAN
-----------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64835

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>6</td><td>0</td></tr></table> 60.00	6	5	4	3	2	1	0	.	0	0									6	0
6	5	4	3	2	1	0	.	0	0												
								6	0												
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>	6	5	4	3	2	1	0	.	0	0										
6	5	4	3	2	1	0	.	0	0												

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 544 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DAVID SMITH

Mailing Address 709 BAYLOR BLVD

City State Zip Code
BIG SPRING TX 79720-3425

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. POSTAL SERVICE ELECTRONICS TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2015

Transaction ID : **SA11.77382**

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LTC (RET) CLARENCE SMITH III

Mailing Address 504 FAIRVIEW PKW

City State Zip Code
LAFAYETTE LA 70508-6334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USARMY (25 9 MO) - PHI COMR PILOT 17 RET X TWO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2015

Transaction ID : **SA11.54597**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LTC (RET) CLARENCE SMITH III

Mailing Address 504 FAIRVIEW PKW

City State Zip Code
LAFAYETTE LA 70508-6334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USARMY (25 9 MO) - PHI COMR PILOT 17 RET X TWO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 28 / 2015

Transaction ID : **SA11.84387**

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 545 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.54774

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	19	/	2015

Transaction ID : SA11.56690

Amount of Each Receipt this Period

4	3	2	1	0	.	2	5
25.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59741

Amount of Each Receipt this Period

4	3	2	1	0	.	1	0
10.00							

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 546 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA11.64319

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2015

Transaction ID : SA11.65676

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2015

Transaction ID : SA11.72571

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 547 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : SA11.73993

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2015

Transaction ID : SA11.75500

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROY SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 85 BRENTHILL DR

City NEWARK	State OH	Zip Code 43055-9777
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation WEB DESIGNER
--------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79121

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 550 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **03 / 26 / 2015**
Transaction ID : SA11.59402
Amount of Each Receipt this Period: **5.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **01 / 27 / 2015**
Transaction ID : SA11.59654
Amount of Each Receipt this Period: **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **01 / 28 / 2015**
Transaction ID : SA11.59806
Amount of Each Receipt this Period: **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ **25.00**
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 552 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **03 / 09 / 2015**
Transaction ID : SA11.63934
Amount of Each Receipt this Period: **19.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **03 / 16 / 2015**
Transaction ID : SA11.64862
Amount of Each Receipt this Period: **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. GRETA SNELLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 9 BAYNE ST.
City NORWALK State CT Zip Code 06851-1202
FEC ID number of contributing federal political committee. **C**
Name of Employer: **HOMEMAKER** Occupation: **RETIRED**
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **407.00**

Date of Receipt: **06 / 16 / 2015**
Transaction ID : SA11.76959
Amount of Each Receipt this Period: **9.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **53.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 554 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARGO A. SOMMERFELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2015
Transaction ID : SA11.54246
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARGO A. SOMMERFELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.55293
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARGO A. SOMMERFELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4454 CASITAS ST.
 City SAN DIEGO State CA Zip Code 92107-4218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.58159
 Amount of Each Receipt this Period 25.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 555 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARGO A. SOMMERFELD
Full Name (Last, First, Middle Initial)
Mailing Address 4454 CASITAS ST.
City SAN DIEGO State CA Zip Code 92107-4218
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt **02 / 17 / 2015**
Transaction ID : SA11.65569
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MARGO A. SOMMERFELD
Full Name (Last, First, Middle Initial)
Mailing Address 4454 CASITAS ST.
City SAN DIEGO State CA Zip Code 92107-4218
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt **05 / 21 / 2015**
Transaction ID : SA11.75220
Amount of Each Receipt this Period 35.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MARGO A. SOMMERFELD
Full Name (Last, First, Middle Initial)
Mailing Address 4454 CASITAS ST.
City SAN DIEGO State CA Zip Code 92107-4218
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt **04 / 27 / 2015**
Transaction ID : SA11.83326
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 556 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MARGO A. SOMMERFELD
Full Name (Last, First, Middle Initial)

Mailing Address 4454 CASITAS ST.

City SAN DIEGO	State CA	Zip Code 92107-4218
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : SA11.84779

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD SPARBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 9371

City RANCHO SANTA FE	State CA	Zip Code 92067-4371
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SPARBER ANNEN MORRIS & GABRIEL	Occupation ATTORNEY
----------------------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.63622

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES SPEIGHTS
Full Name (Last, First, Middle Initial)

Mailing Address 110 BENT OAK DR

City SAN ANTONIO	State TX	Zip Code 78231-1503
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NA	Occupation NA
------------------------	------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11.56138

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	775.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 557 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES SPEIGHTS
Full Name (Last, First, Middle Initial)
Mailing Address 110 BENT OAK DR

City SAN ANTONIO	State TX	Zip Code 78231-1503
FEC ID number of contributing federal political committee. C		
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2015
Transaction ID : SA11.79403

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JIM SPEIGHTS
Full Name (Last, First, Middle Initial)
Mailing Address 110 BENT OAK DR

City SAN ANTONIO	State TX	Zip Code 78231-1503
FEC ID number of contributing federal political committee. C		
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 24 / 2015
Transaction ID : SA11.56864

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CORINNE SPENCE
Full Name (Last, First, Middle Initial)
Mailing Address 1508 EUREKA ROAD

City ROSEVILLE	State CA	Zip Code 95661-2809
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2015
Transaction ID : SA11.59137

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 558 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. CORINNE SPENCE

Mailing Address 1508 EUREKA ROAD

City ROSEVILLE	State CA	Zip Code 95661-2809
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79982

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DAN SPENGLER

Mailing Address 5400 STANFORD DRIVE

City NASHVILLE	State TN	Zip Code 37215-4236
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer VANDERBILT MEDICAL CENTER	Occupation MEDICAL DOCTOR
-----------------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2015

Transaction ID : SA11.64922

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. AVIS SPIES

Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED AGE 85
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2015

Transaction ID : SA11.54151

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 560 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED AGE 85	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Date of Receipt
MM / DD / YYYY
02 / 16 / 2015
Transaction ID : SA11.61850

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED AGE 85	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Date of Receipt
MM / DD / YYYY
02 / 28 / 2015
Transaction ID : SA11.62876

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED AGE 85	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00	

Date of Receipt
MM / DD / YYYY
03 / 13 / 2015
Transaction ID : SA11.64326

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 561 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED AGE 85
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2015

Transaction ID : SA11.73289

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED AGE 85
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80313

Amount of Each Receipt this Period

50.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. AVIS SPIES
Full Name (Last, First, Middle Initial)
Mailing Address 60 HEYBURN RD

City CHADDS FORD	State PA	Zip Code 19317-9707
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED AGE 85
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
585.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2015

Transaction ID : SA11.81707

Amount of Each Receipt this Period

25.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 562 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
03 / 09 / 2015
Transaction ID : SA11.58145

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
03 / 14 / 2015
Transaction ID : SA11.58572

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
02 / 04 / 2015
Transaction ID : SA11.60893

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 563 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
02 / 10 / 2015
Transaction ID : SA11.61429

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
02 / 23 / 2015
Transaction ID : SA11.62556

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
05 / 05 / 2015
Transaction ID : SA11.71770

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 564 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
05 / 20 / 2015
Transaction ID : SA11.74761

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
06 / 05 / 2015
Transaction ID : SA11.76087

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
06 / 08 / 2015
Transaction ID : SA11.76516

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 565 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
04 / 03 / 2015
Transaction ID : SA11.78810

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
04 / 05 / 2015
Transaction ID : SA11.79530

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
MM / DD / YYYY
04 / 07 / 2015
Transaction ID : SA11.80199

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 566 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
04 / 09 / 2015
Transaction ID : SA11.80487

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WARREN SPIKES
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 578

City HUGOTON	State KS	Zip Code 67951-0578
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.83049

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SANDY SPRADLING
Full Name (Last, First, Middle Initial)
Mailing Address 306 ASHLAND CREEK

City VICTORIA	State TX	Zip Code 77901-3685
FEC ID number of contributing federal political committee. C		
Name of Employer LOWES	Occupation CSA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.00	

Date of Receipt
02 / 04 / 2015
Transaction ID : SA11.60560

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 567 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDY SPRADLING
Full Name (Last, First, Middle Initial)

Mailing Address 306 ASHLAND CREEK

City VICTORIA State TX Zip Code 77901-3685

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES Occupation CSA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 10 / 2015
Transaction ID : SA11.61535

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SANDY SPRADLING
Full Name (Last, First, Middle Initial)

Mailing Address 306 ASHLAND CREEK

City VICTORIA State TX Zip Code 77901-3685

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES Occupation CSA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 03 / 2015
Transaction ID : SA11.63129

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SANDY SPRADLING
Full Name (Last, First, Middle Initial)

Mailing Address 306 ASHLAND CREEK

City VICTORIA State TX Zip Code 77901-3685

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES Occupation CSA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 11 / 2015
Transaction ID : SA11.64194

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 568 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDY SPRADLING
Full Name (Last, First, Middle Initial)
Mailing Address 306 ASHLAND CREEK

City VICTORIA	State TX	Zip Code 77901-3685
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES	Occupation CSA
---------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2015

Transaction ID : SA11.65226

Amount of Each Receipt this Period

465.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. SANDY SPRADLING
Full Name (Last, First, Middle Initial)
Mailing Address 306 ASHLAND CREEK

City VICTORIA	State TX	Zip Code 77901-3685
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES	Occupation CSA
---------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79380

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. SANDY SPRADLING
Full Name (Last, First, Middle Initial)
Mailing Address 306 ASHLAND CREEK

City VICTORIA	State TX	Zip Code 77901-3685
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LOWES	Occupation CSA
---------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11.84329

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 569 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN SQUIRES
Full Name (Last, First, Middle Initial)
Mailing Address 1411 BAY HILL DR
City AUSTIN State TX Zip Code 78746-6201
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RET MILITARY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83639
Amount of Each Receipt this Period 250.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE
City MILFORD State CT Zip Code 06460-5781
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA11.57130
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE
City MILFORD State CT Zip Code 06460-5781
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 07 / 2015
Transaction ID : SA11.57842
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 270.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 570 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. CHARLES ST JAMES		Date of Receipt MM / DD / YYYY 03 / 14 / 2015 Transaction ID : SA11.58612
Mailing Address 85 VISCOUNT DRIVE		Amount of Each Receipt this Period 450.00
City MILFORD	State CT	Zip Code 06460-5781
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. CHARLES ST JAMES		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11.62793
Mailing Address 85 VISCOUNT DRIVE		Amount of Each Receipt this Period 10.00
City MILFORD	State CT	Zip Code 06460-5781
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. CHARLES ST JAMES		Date of Receipt MM / DD / YYYY 03 / 11 / 2015 Transaction ID : SA11.64166
Mailing Address 85 VISCOUNT DRIVE		Amount of Each Receipt this Period 10.00
City MILFORD	State CT	Zip Code 06460-5781
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 572 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74764

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	27	/	2015

Transaction ID : SA11.75630

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	13	/	2015

Transaction ID : SA11.76688

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 573 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2015

Transaction ID : SA11.77237

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2015

Transaction ID : SA11.77616

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. CHARLES ST JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 85 VISCOUNT DRIVE

City MILFORD	State CT	Zip Code 06460-5781
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	04	/	2015

Transaction ID : SA11.79158

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 574 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DAVID STAINBACK
Full Name (Last, First, Middle Initial)

Mailing Address 112 BRANDYWINE RD

City MALVERN State PA Zip Code 19355-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 17 / 2015
Transaction ID : SA11.65562

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DAVID STAINBACK
Full Name (Last, First, Middle Initial)

Mailing Address 112 BRANDYWINE RD

City MALVERN State PA Zip Code 19355-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 20 / 2015
Transaction ID : SA11.74766

Amount of Each Receipt this Period 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DAVID STAINBACK
Full Name (Last, First, Middle Initial)

Mailing Address 112 BRANDYWINE RD

City MALVERN State PA Zip Code 19355-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation SMALL BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79060

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 575 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR
City State Zip Code
ROCKY MOUNT NC 27804-1904
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AFFORDABLE SUITES OF AMERICA GENERAL MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
01 / 05 / 2015
Transaction ID : SA11.54101
Amount of Each Receipt this Period
10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR
City State Zip Code
ROCKY MOUNT NC 27804-1904
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AFFORDABLE SUITES OF AMERICA GENERAL MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2015
Transaction ID : SA11.55364
Amount of Each Receipt this Period
10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR
City State Zip Code
ROCKY MOUNT NC 27804-1904
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AFFORDABLE SUITES OF AMERICA GENERAL MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.60517
Amount of Each Receipt this Period
10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 576 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.63236

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	7

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	14	/	2015

Transaction ID : SA11.64464

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.65464

Amount of Each Receipt this Period

6	5	4	3	2	1	0	.	0	0
								2	5

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>6</td><td>0</td></tr></table> 60.00	6	5	4	3	2	1	0	.	0	0									6	0
6	5	4	3	2	1	0	.	0	0												
								6	0												
TOTAL This Period (last page this line number only).....▶	<table border="1"><tr><td>6</td><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td><td>0</td><td>.</td><td>0</td><td>0</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>0</td><td>0</td></tr></table>	6	5	4	3	2	1	0	.	0	0									0	0
6	5	4	3	2	1	0	.	0	0												
								0	0												

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 577 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71792

Amount of Each Receipt this Period

 10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 05 / 2015
Transaction ID : SA11.76045

Amount of Each Receipt this Period

 10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. TERRY STONEMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1144 INDEPENDENCE DR

City ROCKY MOUNT	State NC	Zip Code 27804-1904
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFFORDABLE SUITES OF AMERICA	Occupation GENERAL MANAGER
--------------------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 05 / 2015
Transaction ID : SA11.79441

Amount of Each Receipt this Period

 10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> <input type="text"/> 30.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 578 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MIKE STRODE
Full Name (Last, First, Middle Initial)
Mailing Address 731 GOLDEN PARK AVE.
City SAN DIEGO State CA Zip Code 92106-2912
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.60601
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MIKE STRODE
Full Name (Last, First, Middle Initial)
Mailing Address 731 GOLDEN PARK AVE.
City SAN DIEGO State CA Zip Code 92106-2912
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 10 / 2015
Transaction ID : SA11.61477
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PATRICIA STYER
Full Name (Last, First, Middle Initial)
Mailing Address 6629 113TH PLACE S. E.
City BELLEVUE State WA Zip Code 98006-6429
FEC ID number of contributing federal political committee. **C**
Name of Employer HUSBAND Occupation HOUSEWIFE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11.55141
Amount of Each Receipt this Period 100.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 250.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 579 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PATRICIA STYER
Full Name (Last, First, Middle Initial)

Mailing Address 6629 113TH PLACE S. E.

City BELLEVUE	State WA	Zip Code 98006-6429
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HUSBAND	Occupation HOUSEWIFE
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2015

Transaction ID : SA11.57591

Amount of Each Receipt this Period

100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PATRICIA STYER
Full Name (Last, First, Middle Initial)

Mailing Address 6629 113TH PLACE S. E.

City BELLEVUE	State WA	Zip Code 98006-6429
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HUSBAND	Occupation HOUSEWIFE
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA11.58534

Amount of Each Receipt this Period

100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PATRICIA STYER
Full Name (Last, First, Middle Initial)

Mailing Address 6629 113TH PLACE S. E.

City BELLEVUE	State WA	Zip Code 98006-6429
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer HUSBAND	Occupation HOUSEWIFE
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2015

Transaction ID : SA11.81758

Amount of Each Receipt this Period

50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 580 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. CATHERINE STYZA
Full Name (Last, First, Middle Initial)

Mailing Address 2023 SPRINGBROOK SOUTH

City WAUKESHA State WI Zip Code 53186-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer RYAN ROAD STORAGE, LLC Occupation PROPERTY OWNER/MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2015
Transaction ID : SA11.85218

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD SUGDEN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2468 / 557 E. BROADWAY

City JACKSON State WY Zip Code 83001-2468

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015
Transaction ID : SA11.57819

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY SWEATT
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3087

City SANTA CRUZ State CA Zip Code 95063-3087

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation RET ATTY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : SA11.55611

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1260.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 581 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NANCY SWEATT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RET ATTY
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59809

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NANCY SWEATT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RET ATTY
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

Transaction ID : SA11.64353

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NANCY SWEATT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-3087
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation RET ATTY
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2015

Transaction ID : SA11.75726

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 582 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. NANCY SWEATT

Mailing Address P.O. BOX 3087

City State Zip Code
SANTA CRUZ CA 95063-3087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RET ATTY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 15 / 2015
Transaction ID : SA11.76805

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. STEPHEN SWEET

Mailing Address 13102 INDIAN CREEK

City State Zip Code
HOUSTON TX 77079-7218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLIANCE RESIDENTIAL COMPANY REAL ESTATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 29 / 2015
Transaction ID : SA11.60050

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. STEPHEN SWEET

Mailing Address 13102 INDIAN CREEK

City State Zip Code
HOUSTON TX 77079-7218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALLIANCE RESIDENTIAL COMPANY REAL ESTATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2015
Transaction ID : SA11.63590

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 583 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEPHEN SWEET
Full Name (Last, First, Middle Initial)

Mailing Address 13102 INDIAN CREEK

City HOUSTON State TX Zip Code 77079-7218

FEC ID number of contributing federal political committee. **C**

Name of Employer ALLIANCE RESIDENTIAL COMPANY Occupation REAL ESTATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015
Transaction ID : SA11.72921

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)

Mailing Address 656 JOSHUA COURT

City WALNUT CREEK State CA Zip Code 94598-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 689.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2015
Transaction ID : SA11.56341

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)

Mailing Address 656 JOSHUA COURT

City WALNUT CREEK State CA Zip Code 94598-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 689.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA11.57119

Amount of Each Receipt this Period
 23.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	173.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 584 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)
Mailing Address 656 JOSHUA COURT

City WALNUT CREEK	State CA	Zip Code 94598-1726
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
689.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2015

Transaction ID : SA11.57787

Amount of Each Receipt this Period

689.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)
Mailing Address 656 JOSHUA COURT

City WALNUT CREEK	State CA	Zip Code 94598-1726
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
689.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SA11.60043

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)
Mailing Address 656 JOSHUA COURT

City WALNUT CREEK	State CA	Zip Code 94598-1726
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
689.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.65149

Amount of Each Receipt this Period

18.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	104.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 585 OF 697
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)
Mailing Address 656 JOSHUA COURT

City WALNUT CREEK	State CA	Zip Code 94598-1726
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 689.00	

Date of Receipt
05 / 22 / 2015
Transaction ID : SA11.75437

Amount of Each Receipt this Period
53.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MICHIO TAKAHASHI
Full Name (Last, First, Middle Initial)
Mailing Address 656 JOSHUA COURT

City WALNUT CREEK	State CA	Zip Code 94598-1726
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 689.00	

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.83532

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD TALLMAN
Full Name (Last, First, Middle Initial)
Mailing Address 977 BAYSIDE COVE W

City NEWPORT BEACH	State CA	Zip Code 92660-7419
FEC ID number of contributing federal political committee. C		
Name of Employer NOT EMPLOYED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Date of Receipt
01 / 05 / 2015
Transaction ID : SA11.54104

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	113.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 586 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD TALLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 977 BAYSIDE COVE W

City NEWPORT BEACH State CA Zip Code 92660-7419

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2015

Transaction ID : SA11.63238

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD TALLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 977 BAYSIDE COVE W

City NEWPORT BEACH State CA Zip Code 92660-7419

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015

Transaction ID : SA11.63463

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD TALLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 977 BAYSIDE COVE W

City NEWPORT BEACH State CA Zip Code 92660-7419

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11.65482

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 587 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. RICHARD TALLMAN
 Mailing Address 977 BAYSIDE COVE W
 City State Zip Code
 NEWPORT BEACH CA 92660-7419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NOT EMPLOYED RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2015
Transaction ID : SA11.79443
 Amount of Each Receipt this Period
 10.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. BARBARA TANTAROS
 Mailing Address 4200 INDIAN CREEK RD
 City State Zip Code
 EMMAUS PA 18049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2015
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA17.3418
 Amount of Each Receipt this Period
 300.00
 CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. STANLEY TATE
 Mailing Address 1175 NE 125TH ST.
 City State Zip Code
 NORTH MIAMI FL 33161-5015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED DEVELOPER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015
Transaction ID : SA11.71824
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 588 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MIKE TAYLOR
Full Name (Last, First, Middle Initial)
Mailing Address 543 AUWINA ST

City KAILUA	State HI	Zip Code 96734-3426
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST HAWAIIAN BANK	Occupation MANAGER
-----------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.56373

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. MIKE TAYLOR
Full Name (Last, First, Middle Initial)
Mailing Address 543 AUWINA ST

City KAILUA	State HI	Zip Code 96734-3426
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST HAWAIIAN BANK	Occupation MANAGER
-----------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74782

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. MIKE TAYLOR
Full Name (Last, First, Middle Initial)
Mailing Address 543 AUWINA ST

City KAILUA	State HI	Zip Code 96734-3426
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST HAWAIIAN BANK	Occupation MANAGER
-----------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79973

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 589 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILFORD TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 898

City CANYON State TX Zip Code 79015-0898

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.54563

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILFORD TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 898

City CANYON State TX Zip Code 79015-0898

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2015
Transaction ID : SA11.56056

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILFORD TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 898

City CANYON State TX Zip Code 79015-0898

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 09 / 2015
Transaction ID : SA11.58147

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 591 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRED TEDESCO
Full Name (Last, First, Middle Initial)

Mailing Address 9216 SPRING RUNBLVD

City State Zip Code
BONITA SPRINGS FL 34135-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 04 / 2015
Transaction ID : SA11.60320

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRED TEDESCO
Full Name (Last, First, Middle Initial)

Mailing Address 9216 SPRING RUNBLVD

City State Zip Code
BONITA SPRINGS FL 34135-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2015
Transaction ID : SA11.62320

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRED TEDESCO
Full Name (Last, First, Middle Initial)

Mailing Address 9216 SPRING RUNBLVD

City State Zip Code
BONITA SPRINGS FL 34135-4048

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2015
Transaction ID : SA11.64975

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 592 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRED TEDESCO
Full Name (Last, First, Middle Initial)
Mailing Address 9216 SPRING RUNBLVD
City BONITA SPRINGS State FL Zip Code 34135-4048
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **330.00**

Date of Receipt **05 / 06 / 2015**
Transaction ID : SA11.72605
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRED TEDESCO
Full Name (Last, First, Middle Initial)
Mailing Address 9216 SPRING RUNBLVD
City BONITA SPRINGS State FL Zip Code 34135-4048
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **330.00**

Date of Receipt **04 / 27 / 2015**
Transaction ID : SA11.82882
Amount of Each Receipt this Period **10.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BRANDT TEMPLE
Full Name (Last, First, Middle Initial)
Mailing Address 4626 SAINT CHARLES AVE
City NEW ORLEANS State LA Zip Code 70115-4834
FEC ID number of contributing federal political committee. **C**
Name of Employer OWNER OF SUNRISE EXPLORATION & PROI Occupation SELF EMPLOYED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 28 / 2015**
Transaction ID : SA11.62883
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **120.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 593 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BRANDT TEMPLE
Full Name (Last, First, Middle Initial)
Mailing Address 4626 SAINT CHARLES AVE

City NEW ORLEANS	State LA	Zip Code 70115-4834
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer OWNER OF SUNRISE EXPLORATION & PROI	Occupation SELF EMPLOYED
---------------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SA11.63220

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BRANDT TEMPLE
Full Name (Last, First, Middle Initial)
Mailing Address 4626 SAINT CHARLES AVE

City NEW ORLEANS	State LA	Zip Code 70115-4834
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer OWNER OF SUNRISE EXPLORATION & PRODUCT	Occupation SELF EMPLOYED
------------------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2015

Transaction ID : SA11.79974

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. BRANDT TEMPLE
Full Name (Last, First, Middle Initial)
Mailing Address 4626 SAINT CHARLES AVE

City NEW ORLEANS	State LA	Zip Code 70115-4834
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer OWNER OF SUNRISE EXPLORATION & PROI	Occupation SELF EMPLOYED
---------------------------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

Transaction ID : SA11.80677

Amount of Each Receipt this Period

100.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 594 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. MEL TOLHURST
Full Name (Last, First, Middle Initial)

Mailing Address 24 ALPINE DRIVE

City PERRINEVILLE State NJ Zip Code 08535-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2015
Transaction ID : SA11.77188

Amount of Each Receipt this Period
 49.99

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. HOWARD TUGGEY
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DRIVE

City TROPHY CLUB State TX Zip Code 76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED BUT BUSY. Occupation RETIRED US ARMY COLONEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11.57025

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. HOWARD TUGGEY
Full Name (Last, First, Middle Initial)

Mailing Address 558 TIMBER RIDGE DRIVE

City TROPHY CLUB State TX Zip Code 76262-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer NOT EMPLOYED BUT BUSY. Occupation RETIRED US ARMY COLONEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : SA11.59129

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 199.99

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 596 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JEAN TURLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17308 NE 85TH PL

City REDMOND	State WA	Zip Code 98052-3953
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation HOUSEWIFE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	

Date of Receipt
06 / 09 / 2015
Transaction ID : SA11.76551

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JEAN TURLEY
Full Name (Last, First, Middle Initial)
Mailing Address 17308 NE 85TH PL

City REDMOND	State WA	Zip Code 98052-3953
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation HOUSEWIFE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.00	

Date of Receipt
04 / 28 / 2015
Transaction ID : SA11.83963

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. PATRICIA VACKAR
Full Name (Last, First, Middle Initial)
Mailing Address 1000 HENDERSON STREET

City FORT WORTH	State TX	Zip Code 76102-4500
FEC ID number of contributing federal political committee. C		
Name of Employer XTO ENERGY, INC.	Occupation SR. LAND ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
02 / 10 / 2015
Transaction ID : SA11.55831

Amount of Each Receipt this Period
150.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 597 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PATRICIA VACKAR
Full Name (Last, First, Middle Initial)

Mailing Address 1000 HENDERSON STREET

City FORT WORTH State TX Zip Code 76102-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer XTO ENERGY, INC. Occupation SR. LAND ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79055

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. PATRICIA VACKAR
Full Name (Last, First, Middle Initial)

Mailing Address 1000 HENDERSON STREET

City FORT WORTH State TX Zip Code 76102-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer XTO ENERGY, INC. Occupation SR. LAND ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 04 / 03 / 2015
Transaction ID : SA11.79057

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. VINCENT VAN PELT
Full Name (Last, First, Middle Initial)

Mailing Address 2906 CALLE GAUCHO

City SAN CLEMENTE State CA Zip Code 92673-3014

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 01 / 29 / 2015
Transaction ID : SA11.54559

Amount of Each Receipt this Period 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 225.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 598 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DEBORAH VANDYK
Full Name (Last, First, Middle Initial)

Mailing Address 2767 NEW HOLLAND STREET

City HUDSONVILLE State MI Zip Code 49426-9454

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2015
Transaction ID : SA11.77340

Amount of Each Receipt this Period
300.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)

Mailing Address 151 DEVON ROAD

City BRONXVILLE State NY Zip Code 10708-5700

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2015
Transaction ID : SA11.55264

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)

Mailing Address 151 DEVON ROAD

City BRONXVILLE State NY Zip Code 10708-5700

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2015
Transaction ID : SA11.61423

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 599 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2015
Transaction ID : SA11.75451
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 29 / 2015
Transaction ID : SA11.77570
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2015
Transaction ID : SA11.78780
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 600 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2015
Transaction ID : SA11.79791
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2015
Transaction ID : SA11.80217
Amount of Each Receipt this Period
25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. THOMAS VILLAMANA
Full Name (Last, First, Middle Initial)
Mailing Address 151 DEVON ROAD
City BRONXVILLE State NY Zip Code 10708-5700
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2015
Transaction ID : SA11.83467
Amount of Each Receipt this Period
50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 601 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WALTER VINES
Full Name (Last, First, Middle Initial)
Mailing Address 174 MORRISON AVE

City STATEN ISLAND	State NY	Zip Code 10310-2835
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FDNY	Occupation RETIRED FIREFIGHTER
--------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2015

Transaction ID : SA11.64036

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DRURY L. VINTON
Full Name (Last, First, Middle Initial)
Mailing Address 365 N.MAIN ST.

City WEST LEBANON	State NH	Zip Code 03784-1011
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2015

Transaction ID : SA11.64554

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DRURY L. VINTON
Full Name (Last, First, Middle Initial)
Mailing Address 365 N.MAIN ST.

City WEST LEBANON	State NH	Zip Code 03784-1011
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SA11.76350

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 602 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DRURY L. VINTON
Full Name (Last, First, Middle Initial)
Mailing Address 365 N.MAIN ST.
City WEST LEBANON State NH Zip Code 03784-1011
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **04 / 22 / 2015**
Transaction ID : SA11.81624
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DRURY L. VINTON
Full Name (Last, First, Middle Initial)
Mailing Address 365 N.MAIN ST.
City WEST LEBANON State NH Zip Code 03784-1011
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11.84375
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD VOELL
Full Name (Last, First, Middle Initial)
Mailing Address 13611 DEERING BAY DRIVE
City CORAL GABLES State FL Zip Code 33158-2839
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2350.00**

Date of Receipt **01 / 28 / 2015**
Transaction ID : SA11.54443
Amount of Each Receipt this Period **100.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 603 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2015
Transaction ID : SA11.57094

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2015
Transaction ID : SA11.60052

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60675

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 604 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2015
Transaction ID : SA11.62606

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2015
Transaction ID : SA11.65033

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2015
Transaction ID : SA11.65236

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 606 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2015
Transaction ID : SA11.75917

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2015
Transaction ID : SA11.75918

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2015
Transaction ID : SA11.81620

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 607 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 04 / 22 / 2015
Transaction ID : SA11.81622

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 04 / 25 / 2015
Transaction ID : SA11.81964

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD VOELL
Full Name (Last, First, Middle Initial)

Mailing Address 13611 DEERING BAY DRIVE

City CORAL GABLES State FL Zip Code 33158-2839

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2350.00

Date of Receipt 04 / 26 / 2015
Transaction ID : SA11.82287

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 608 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. SANDRA VON VALTIER
Full Name (Last, First, Middle Initial)

Mailing Address 26820 W. LAKEVIEW DR., SO.

City WAUCONDA State IL Zip Code 60084-2316

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2015

Transaction ID : SA11.71888

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANCES ANN WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON State AZ Zip Code 85718-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA Occupation RETIRED CHEMISTRY PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11.56779

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANCES ANN WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON State AZ Zip Code 85718-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA Occupation RETIRED CHEMISTRY PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015

Transaction ID : SA11.57438

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 610 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. FRANCES ANN WALKER		Date of Receipt MM / DD / YYYY 02 / 04 / 2015 Transaction ID : SA11.60429
Mailing Address 5920 N CAMINO PADRE ISIDORO		Amount of Each Receipt this Period CONTRIBUTION 10.00
City TUCSON	State AZ	Zip Code 85718-4032
FEC ID number of contributing federal political committee. C		NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. FRANCES ANN WALKER		Date of Receipt MM / DD / YYYY 02 / 10 / 2015 Transaction ID : SA11.61465
Mailing Address 5920 N CAMINO PADRE ISIDORO		Amount of Each Receipt this Period CONTRIBUTION 25.00
City TUCSON	State AZ	Zip Code 85718-4032
FEC ID number of contributing federal political committee. C		NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. FRANCES ANN WALKER		Date of Receipt MM / DD / YYYY 02 / 17 / 2015 Transaction ID : SA11.62039
Mailing Address 5920 N CAMINO PADRE ISIDORO		Amount of Each Receipt this Period CONTRIBUTION 10.00
City TUCSON	State AZ	Zip Code 85718-4032
FEC ID number of contributing federal political committee. C		NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 611 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. FRANCES ANN WALKER
Full Name (Last, First, Middle Initial)
Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR
-----------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	13	/	2015

Transaction ID : SA11.81025

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. FRANCES ANN WALKER
Full Name (Last, First, Middle Initial)
Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR
-----------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11.81285

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. FRANCES ANN WALKER
Full Name (Last, First, Middle Initial)
Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON	State AZ	Zip Code 85718-4032
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA	Occupation RETIRED CHEMISTRY PROFESSOR
-----------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	26	/	2015

Transaction ID : SA11.81980

Amount of Each Receipt this Period
5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 612 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEWIS C WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 24621 HARBOUR VIEW DRIVE

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1506
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation ORTHODONTIST (RETIRED)
--------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : SA11.61289

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LEWIS C WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 24621 HARBOUR VIEW DRIVE

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1506
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation ORTHODONTIST (RETIRED)
--------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2015
Transaction ID : SA11.63217

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LEWIS C WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 24621 HARBOUR VIEW DRIVE

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1506
---------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation ORTHODONTIST (RETIRED)
--------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2015
Transaction ID : SA11.79919

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 613 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. LEWIS C WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 24621 HARBOUR VIEW DRIVE

City State Zip Code
PONTE VEDRA BEACH FL 32082-1506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ORTHODONTIST (RETIRED)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2015
Transaction ID : SA11.82256

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. CAROL WARD
Full Name (Last, First, Middle Initial)

Mailing Address 14300 JACKSON RG

City State Zip Code
RANCHO MURIETA CA 95683-9712

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 21 / 2015
Transaction ID : SA11.65256

Amount of Each Receipt this Period
500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City State Zip Code
RENO NV 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 05 / 2015
Transaction ID : SA11.57481

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 614 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. RICHARD WATSON		Date of Receipt MM / DD / YYYY 01 / 22 / 2015 Transaction ID : SA11.59589
Mailing Address 1520 SKY VALLEY DRIVE		Amount of Each Receipt this Period 10.00
City RENO	State NV	Zip Code 89523-7994
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. RICHARD WATSON		Date of Receipt MM / DD / YYYY 02 / 10 / 2015 Transaction ID : SA11.61481
Mailing Address 1520 SKY VALLEY DRIVE		Amount of Each Receipt this Period 10.00
City RENO	State NV	Zip Code 89523-7994
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. RICHARD WATSON		Date of Receipt MM / DD / YYYY 02 / 16 / 2015 Transaction ID : SA11.61952
Mailing Address 1520 SKY VALLEY DRIVE		Amount of Each Receipt this Period 10.00
City RENO	State NV	Zip Code 89523-7994
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 616 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City RENO State NV Zip Code 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 07 / 2015

Transaction ID : SA11.72944

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City RENO State NV Zip Code 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11.73756

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City RENO State NV Zip Code 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2015

Transaction ID : SA11.74167

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 618 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City RENO State NV Zip Code 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 30 / 2015**

Transaction ID : SA11.77901

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. RICHARD WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1520 SKY VALLEY DRIVE

City RENO State NV Zip Code 89523-7994

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 30 / 2015**

Transaction ID : SA11.78219

Amount of Each Receipt this Period **15.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JOHN WAVELL
Full Name (Last, First, Middle Initial)

Mailing Address P.O.BOX 727

City LOS ALAMITOS State CA Zip Code 90720-0727

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation BUSINESSMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt **02 / 10 / 2015**

Transaction ID : SA11.55829

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **275.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 619 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN WAVELL
Full Name (Last, First, Middle Initial)
Mailing Address P.O.BOX 727

City LOS ALAMITOS	State CA	Zip Code 90720-0727
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation BUSINESSMAN
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60740

Amount of Each Receipt this Period

 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JOHN WAVELL
Full Name (Last, First, Middle Initial)
Mailing Address P.O.BOX 727

City LOS ALAMITOS	State CA	Zip Code 90720-0727
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation BUSINESSMAN
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2015
Transaction ID : SA11.65591

Amount of Each Receipt this Period

 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN	State NY	Zip Code 12466-1165
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2015
Transaction ID : SA11.54400

Amount of Each Receipt this Period

 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> . <input type="text"/> . 225.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/> .

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 620 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 05 / 2015
Transaction ID : SA11.55436

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 10 / 2015
Transaction ID : SA11.55882

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
02 / 16 / 2015
Transaction ID : SA11.56204

Amount of Each Receipt this Period
20.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 621 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2015

Transaction ID : SA11.56876

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2015

Transaction ID : SA11.57498

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2015

Transaction ID : SA11.57848

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 622 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 23 / 2015
Transaction ID : SA11.59369

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 05 / 2015
Transaction ID : SA11.59520

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 03 / 2015
Transaction ID : SA11.63091

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 45.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 623 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 05 / 2015
Transaction ID : SA11.76369

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 13 / 2015
Transaction ID : SA11.76705

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 30 / 2015
Transaction ID : SA11.77731

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 60.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 624 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 30 / 2015
Transaction ID : SA11.78199

Amount of Each Receipt this Period
15.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 05 / 2015
Transaction ID : SA11.79544

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 06 / 2015
Transaction ID : SA11.79886

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 625 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 08 / 2015
Transaction ID : SA11.80364

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 16 / 2015
Transaction ID : SA11.81271

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 20 / 2015
Transaction ID : SA11.81415

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 626 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 23 / 2015
Transaction ID : SA11.81675

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 27 / 2015
Transaction ID : SA11.83114

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. EDWARD WEBER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1165
231 TILDEN ST

City PORT EWEN State NY Zip Code 12466-1165

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 04 / 2015
Transaction ID : SA11.85344

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 627 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. STEVEN WEBSTER
Full Name (Last, First, Middle Initial)

Mailing Address 1000 LOUISIANA

City HOUSTON State TX Zip Code 77002-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer AVISTA CAPITAL Occupation CO-CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 8000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11.80690

Amount of Each Receipt this Period
 8000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROBERT WELLS
Full Name (Last, First, Middle Initial)

Mailing Address 3 LA SENDA PLACE

City LAGUNA BEACH State CA Zip Code 92651-6738

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11.56598

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROBERT WELLS
Full Name (Last, First, Middle Initial)

Mailing Address 3 LA SENDA PLACE

City LAGUNA BEACH State CA Zip Code 92651-6738

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 16 / 2015
Transaction ID : SA11.61860

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	8050.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 628 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ROBERT WELLS

Mailing Address 3 LA SENDA PLACE

City LAGUNA BEACH State CA Zip Code 92651-6738

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2015
Transaction ID : SA11.63609

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. ROBERT WELLS

Mailing Address 3 LA SENDA PLACE

City LAGUNA BEACH State CA Zip Code 92651-6738

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2015
Transaction ID : SA11.78200

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ROBERT WELLS

Mailing Address 3 LA SENDA PLACE

City LAGUNA BEACH State CA Zip Code 92651-6738

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83463

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 629 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROY WENNERHOLM
Full Name (Last, First, Middle Initial)
Mailing Address 916 TABOOTS COURT

City IVINS	State UT	Zip Code 84738-6429
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation ELECTRICAL ENGINEER
-----------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

Transaction ID : SA11.74822

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ROY WENNERHOLM
Full Name (Last, First, Middle Initial)
Mailing Address 916 TABOOTS COURT

City IVINS	State UT	Zip Code 84738-6429
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation ELECTRICAL ENGINEER
-----------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77899

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. ROY WENNERHOLM
Full Name (Last, First, Middle Initial)
Mailing Address 916 TABOOTS COURT

City IVINS	State UT	Zip Code 84738-6429
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation ELECTRICAL ENGINEER
-----------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SA11.80331

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 630 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROY WENNERHOLM
Full Name (Last, First, Middle Initial)
Mailing Address 916 TABOOTS COURT
City IVINS State UT Zip Code 84738-6429
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation ELECTRICAL ENGINEER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **04 / 25 / 2015**
Transaction ID : SA11.81914
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JERI WESLEY
Full Name (Last, First, Middle Initial)
Mailing Address 6105 LYNNHAVEN
City LUBBOCK State TX Zip Code 79413-5329
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation REAL ESTATE BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5050.00**

Date of Receipt **03 / 12 / 2015**
Transaction ID : SA11.65679
Amount of Each Receipt this Period **50.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JERI WESLEY
Full Name (Last, First, Middle Initial)
Mailing Address 6105 LYNNHAVEN
City LUBBOCK State TX Zip Code 79413-5329
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation REAL ESTATE BROKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **5050.00**

Date of Receipt **05 / 10 / 2015**
Transaction ID : SA11.73337
Amount of Each Receipt this Period **5000.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **5075.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 632 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JESSIE WESTCAMP
Full Name (Last, First, Middle Initial)

Mailing Address 940 CO. RD. 303

City ELK CREEK State CA Zip Code 95939-9701

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RET RANCHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 14 / 2015

Transaction ID : SA11.74023

Amount of Each Receipt this Period
 5.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. LAWRENCE WHIPPLE
Full Name (Last, First, Middle Initial)

Mailing Address 26 CANNON COURT

City BASKING RIDGE State NJ Zip Code 07920-3842

FEC ID number of contributing federal political committee. **C**

Name of Employer MSW CAPITAL, LLC Occupation LAWYER/EXECUTIVE MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015

Transaction ID : SA11.83650

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. COL ROBERT WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 1850 DELPHINA COURT

City CAMERON PARK State CA Zip Code 95682-8963

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2015

Transaction ID : SA11.79083

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	405.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 633 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. COL ROBERT WHITE
Full Name (Last, First, Middle Initial)
Mailing Address 1850 DELPHINA COURT

City CAMERON PARK	State CA	Zip Code 95682-8963
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	09	/	2015

Transaction ID : SA11.80523

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. COL ROBERT WHITE
Full Name (Last, First, Middle Initial)
Mailing Address 1850 DELPHINA COURT

City CAMERON PARK	State CA	Zip Code 95682-8963
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	25	/	2015

Transaction ID : SA11.81965

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WALTER WHITE
Full Name (Last, First, Middle Initial)
Mailing Address 11523 WINDOVER

City HOUSTON	State TX	Zip Code 77024-5222
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ECONOMY POLYMERS AND CHEMICALS	Occupation COO/OWNER
----------------------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2015

Transaction ID : SA11.83654

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	10200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 634 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JIM WHITSETT
Full Name (Last, First, Middle Initial)
Mailing Address 598 MAUREEN LN
City PLEASANT HILL State CA Zip Code 94523-2751
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 01 / 22 / 2015
Transaction ID : SA11.59603
Amount of Each Receipt this Period 50.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JIM WHITSETT
Full Name (Last, First, Middle Initial)
Mailing Address 598 MAUREEN LN
City PLEASANT HILL State CA Zip Code 94523-2751
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 06 / 30 / 2015
Transaction ID : SA11.77944
Amount of Each Receipt this Period 35.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. LAIRD WIGGIN
Full Name (Last, First, Middle Initial)
Mailing Address 167 LLEWELLYN DRIVE
City WESTFIELD State MA Zip Code 01085-2515
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00

Date of Receipt 02 / 28 / 2015
Transaction ID : SA11.57133
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 635 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. LAIRD WIGGIN

Mailing Address 167 LLEWELLYN DRIVE

City WESTFIELD	State MA	Zip Code 01085-2515
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2015

Transaction ID : SA11.59546

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. LAIRD WIGGIN

Mailing Address 167 LLEWELLYN DRIVE

City WESTFIELD	State MA	Zip Code 01085-2515
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.62534

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. LAIRD WIGGIN

Mailing Address 167 LLEWELLYN DRIVE

City WESTFIELD	State MA	Zip Code 01085-2515
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77726

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 636 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. JOHN WILEY

Mailing Address **804 QUAIL AVENUE
APT B**

City **PITTSBURGH** State **PA** Zip Code **15202-1164**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ON DISABILITY** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **03 / 05 / 2015**

Transaction ID : SA11.63290

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. JOHN WILEY

Mailing Address **804 QUAIL AVENUE
APT B**

City **PITTSBURGH** State **PA** Zip Code **15202-1164**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ON DISABILITY** Occupation **NONE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **04 / 12 / 2015**

Transaction ID : SA11.80863

Amount of Each Receipt this Period **10.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. ELAINE R. WILLIAMS

Mailing Address **128 CAVALRY DRIVE**

City **FRANKLIN** State **TN** Zip Code **37064-4904**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **02 / 05 / 2015**

Transaction ID : SA11.60995

Amount of Each Receipt this Period **100.00**

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 637 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ELAINE R. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 CAVALRY DRIVE
 City FRANKLIN State TN Zip Code 37064-4904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 12 / 2015
Transaction ID : SA11.80931
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. ELAINE R. WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 CAVALRY DRIVE
 City FRANKLIN State TN Zip Code 37064-4904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 04 / 27 / 2015
Transaction ID : SA11.83566
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. L THOMAS WILLIAMS JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2020 BRUCK ST
 City COLUMBUS State OH Zip Code 43207-2329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FRANKLIN INTERNATIONAL Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2015
Transaction ID : SA11.71945
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶ 650.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 638 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JOHN WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 7239 KENSINGTON CT

City State Zip Code
UNIVERSITY PARK FL 34201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2015

Transaction ID : SA17.3556

Amount of Each Receipt this Period
250.00

CONTRIBUTION TO CAREY ACCOUNT

B. DEAN F WOLF
Full Name (Last, First, Middle Initial)

Mailing Address 3108 CAMINO DE LA SIERRA

City State Zip Code
ALBUQUERQUE NM 87111-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LZ TECHNOLOGY ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 17 / 2015

Transaction ID : SA11.56369

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DEAN F WOLF
Full Name (Last, First, Middle Initial)

Mailing Address 3108 CAMINO DE LA SIERRA

City State Zip Code
ALBUQUERQUE NM 87111-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LZ TECHNOLOGY ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : SA11.65592

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 639 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DEAN F WOLF
Full Name (Last, First, Middle Initial)
Mailing Address 3108 CAMINO DE LA SIERRA

City ALBUQUERQUE	State NM	Zip Code 87111-5604
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer LZ TECHNOLOGY	Occupation ENGINEER
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2015

Transaction ID : SA11.71966

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW

City DECATUR	State AL	Zip Code 35601-3728
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SA11.56385

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW

City DECATUR	State AL	Zip Code 35601-3728
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.57153

Amount of Each Receipt this Period
10.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	70.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 640 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW

City DECATUR	State AL	Zip Code 35601-3728
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.61469

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW

City DECATUR	State AL	Zip Code 35601-3728
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2015

Transaction ID : SA11.62874

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW

City DECATUR	State AL	Zip Code 35601-3728
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	11	/	2015

Transaction ID : SA11.64163

Amount of Each Receipt this Period

10.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	▶	30.00
TOTAL This Period (last page this line number only).....	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 641 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW
City DECATUR State AL Zip Code 35601-3728
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt 03 / 15 / 2015
Transaction ID : SA11.64545
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW
City DECATUR State AL Zip Code 35601-3728
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt 05 / 21 / 2015
Transaction ID : SA11.75283
Amount of Each Receipt this Period 25.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DIANE WOODARD
Full Name (Last, First, Middle Initial)
Mailing Address 1616 DANDRIDGE ST SW
City DECATUR State AL Zip Code 35601-3728
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt 04 / 04 / 2015
Transaction ID : SA11.79206
Amount of Each Receipt this Period 10.00
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 642 OF 697
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DEAN WOODMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 MOCKINGBIRD TRAIL
 City PALM BEACH State FL Zip Code 33480-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : SA11.59031
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DEAN WOODMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 MOCKINGBIRD TRAIL
 City PALM BEACH State FL Zip Code 33480-3117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2015
Transaction ID : SA11.83652
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NATHAN L. WORKMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 198 MILL STREET
 City STOUGHTON State MA Zip Code 02072-1404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DOD Occupation RETIRED FINANCIAL MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 04 / 2015
Transaction ID : SA11.60288
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ► 1200.00
TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 643 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. NATHAN L. WORKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 198 MILL STREET

City STOUGHTON State MA Zip Code 02072-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer DOD Occupation RETIRED FINANCIAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11.65303

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. NATHAN L. WORKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 198 MILL STREET

City STOUGHTON State MA Zip Code 02072-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer DOD Occupation RETIRED FINANCIAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11.73769

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. NATHAN L. WORKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 198 MILL STREET

City STOUGHTON State MA Zip Code 02072-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer DOD Occupation RETIRED FINANCIAL MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2015

Transaction ID : SA11.80308

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 644 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DALE WRIGHT

Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.55928

Amount of Each Receipt this Period

4	3	2	1	0	.	0	0
10.00							

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. DALE WRIGHT

Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SA11.59243

Amount of Each Receipt this Period

4	3	2	1	0	.	2	2
22.00							

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. DALE WRIGHT

Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.59677

Amount of Each Receipt this Period

4	3	2	1	0	.	1	0
11.00							

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	43.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 645 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DALE WRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	27	/	2015

Transaction ID : SA11.59678

Amount of Each Receipt this Period

11.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DALE WRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60509

Amount of Each Receipt this Period

22.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DALE WRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 8000 COUNTRY TRAIL DR

City ORANGEVALE	State CA	Zip Code 95662-2134
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61933

Amount of Each Receipt this Period

10.00

CONTRIBUTION
 NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	43.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 647 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DALE WRIGHT
Full Name (Last, First, Middle Initial)
Mailing Address 8000 COUNTRY TRAIL DR
City ORANGEVALE State CA Zip Code 95662-2134
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **213.00**

Date of Receipt **04 / 28 / 2015**
Transaction ID : SA11.84257
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES WYATT
Full Name (Last, First, Middle Initial)
Mailing Address 10387 SIERRA RIDGE LN
City PARKER State CO Zip Code 80134-4972
FEC ID number of contributing federal political committee. **C**
Name of Employer MY WIFE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **06 / 21 / 2015**
Transaction ID : SA11.77278
Amount of Each Receipt this Period **250.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD
City GERRARDSTOWN State WV Zip Code 25420-3826
FEC ID number of contributing federal political committee. **C**
Name of Employer RET. Occupation RET.
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **750.00**

Date of Receipt **02 / 06 / 2015**
Transaction ID : SA11.55660
Amount of Each Receipt this Period **25.00**
CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... **300.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 648 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial) A. WILLARD WYNNE		Date of Receipt MM / DD / YYYY 03 / 04 / 2015 Transaction ID : SA11.57445
Mailing Address 473 NANCY JACK ROAD		Amount of Each Receipt this Period 50.00
City GERRARDSTOWN	State WV	Zip Code 25420-3826
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RET.	Occupation RET.	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. WILLARD WYNNE		Date of Receipt MM / DD / YYYY 03 / 08 / 2015 Transaction ID : SA11.58018
Mailing Address 473 NANCY JACK ROAD		Amount of Each Receipt this Period 50.00
City GERRARDSTOWN	State WV	Zip Code 25420-3826
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RET.	Occupation RET.	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. WILLARD WYNNE		Date of Receipt MM / DD / YYYY 03 / 09 / 2015 Transaction ID : SA11.58215
Mailing Address 473 NANCY JACK ROAD		Amount of Each Receipt this Period 100.00
City GERRARDSTOWN	State WV	Zip Code 25420-3826
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RET.	Occupation RET.	NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 649 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
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FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

Transaction ID : SA11.59453

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2015

Transaction ID : SA11.59905

Amount of Each Receipt this Period
100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	16	/	2015

Transaction ID : SA11.61963

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 650 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2015

Transaction ID : SA11.73773

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2015

Transaction ID : SA11.75897

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. WILLARD WYNNE
Full Name (Last, First, Middle Initial)
Mailing Address 473 NANCY JACK ROAD

City GERRARDSTOWN	State WV	Zip Code 25420-3826
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RET.	Occupation RET.
--------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11.77736

Amount of Each Receipt this Period

25.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 651 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. WILLARD WYNNE

Mailing Address 473 NANCY JACK ROAD

City State Zip Code
GERRARDSTOWN WV 25420-3826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RET. RET.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2015

Transaction ID : **SA11.81066**

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
B. MIGUEL XAVIER

Mailing Address 3142 S ADAMS WAY

City State Zip Code
DENVER CO 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 17 / 2015

Transaction ID : **SA17.3620**

Amount of Each Receipt this Period
300.00

CONTRIBUTION TO CAREY ACCOUNT

Full Name (Last, First, Middle Initial)
C. BARBARA ZABER

Mailing Address 508 CR 2907

City State Zip Code
DODD CITY TX 75438-3013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BAKER BOTTS LLP WORD PROCESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
01 / 27 / 2015

Transaction ID : **SA11.54268**

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 652 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BARBARA ZABER
Full Name (Last, First, Middle Initial)
Mailing Address 508 CR 2907

City DODD CITY	State TX	Zip Code 75438-3013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BAKER BOTTS LLP	Occupation WORD PROCESSOR
-------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	04	/	2015

Transaction ID : SA11.60343

Amount of Each Receipt this Period
25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. BARBARA ZABER
Full Name (Last, First, Middle Initial)
Mailing Address 508 CR 2907

City DODD CITY	State TX	Zip Code 75438-3013
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BAKER BOTTS LLP	Occupation WORD PROCESSOR
-------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2015

Transaction ID : SA11.75463

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES ZEH
Full Name (Last, First, Middle Initial)
Mailing Address 1304 CONDOR DRIVE

City GREENSBORO	State NC	Zip Code 27410-2715
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	10	/	2015

Transaction ID : SA11.55825

Amount of Each Receipt this Period
50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 653 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JAMES ZEH
Full Name (Last, First, Middle Initial)

Mailing Address 1304 CONDOR DRIVE

City Greensboro State NC Zip Code 27410-2715

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2015

Transaction ID : SA11.61986

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. JAMES ZEH
Full Name (Last, First, Middle Initial)

Mailing Address 1304 CONDOR DRIVE

City Greensboro State NC Zip Code 27410-2715

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2015

Transaction ID : SA11.63368

Amount of Each Receipt this Period
 50.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. JAMES ZEH
Full Name (Last, First, Middle Initial)

Mailing Address 1304 CONDOR DRIVE

City Greensboro State NC Zip Code 27410-2715

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2015

Transaction ID : SA11.73776

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 654 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. DEANNA ZWEIFEL
Full Name (Last, First, Middle Initial)
Mailing Address 1725 12TH STREET

City GERING	State NE	Zip Code 69341-4105
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FORMER TEACHER	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2015

Transaction ID : SA11.57950

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

B. DEANNA ZWEIFEL
Full Name (Last, First, Middle Initial)
Mailing Address 1725 12TH STREET

City GERING	State NE	Zip Code 69341-4105
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FORMER TEACHER	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2015

Transaction ID : SA11.76979

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

C. DEANNA ZWEIFEL
Full Name (Last, First, Middle Initial)
Mailing Address 1725 12TH STREET

City GERING	State NE	Zip Code 69341-4105
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FORMER TEACHER	Occupation RETIRED
------------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

Transaction ID : SA11.79009

Amount of Each Receipt this Period

50.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT CONTRIBUTION TO CAREY ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 655 OF 697
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. ALLEGIANCE LIST MARKETING

Mailing Address 202 CHURCH ST. SE SUITE 100

City LEESBURG State VA Zip Code 20175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA17.1001

Amount of Each Receipt this Period
 4200.00

LIST RENTAL INCOME

Full Name (Last, First, Middle Initial)
B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA17.999

Amount of Each Receipt this Period
 4335.00

LIST RENTAL INCOME

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	8535.00
TOTAL This Period (last page this line number only).....▶	168204.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. ACCESS NATIONAL BANK

Mailing Address 4221 WALNEY RD
SUITE 120

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
BANK FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I1152

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I1141

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I1142

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : SB21B.I1143

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SB21B.I1144

Amount of Each Disbursement this Period

24.38

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB21B.I1145

Amount of Each Disbursement this Period

7.95

SUBTOTAL of Disbursements This Page (optional)..... ▶

40.28

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2015

Transaction ID : SB21B.I1146

Amount of Each Disbursement this Period

20.19

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : SB21B.I1147

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SB21B.I1148

Amount of Each Disbursement this Period

22.18

SUBTOTAL of Disbursements This Page (optional)..... ▶

50.32

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2015

Transaction ID : SB21B.I1149

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 981540

City EL PASO State TX Zip Code 79998

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2015

Transaction ID : SB21B.I1150

Amount of Each Disbursement this Period

35.41

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL LISTS, LLC

Mailing Address 1252 RAMBLING RILL CIR

City STATHAM State GA Zip Code 30666

Purpose of Disbursement
LIST RENTAL FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.I4238

Amount of Each Disbursement this Period

2105.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

2148.36

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
ONLINE ADVERTISING FEES

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2015

Transaction ID : SB21B.I1151

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
OUTBOUND MESSAGING CONSULTING

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2015

Transaction ID : SB21B.I1174

Amount of Each Disbursement this Period

1197.96

Full Name (Last, First, Middle Initial)

C. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
OUTBOUND MESSAGING CONSULTING

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2015

Transaction ID : SB21B.I1175

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

7197.96

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
LEGAL AND COMPLIANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I1176

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DELUXE BUSINESS SYSTEM

Mailing Address 3680 VICTORIA STREET NORTH

City SHOREVIEW State MN Zip Code 55126

Purpose of Disbursement
OFFICE SUPPLIES

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I4242

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement
ADVOCACY MAIL PRODUCTION

003
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I4237

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City DULLES State VA Zip Code 20166

Purpose of Disbursement
ADVOCACY MAIL PRODUCTION

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.I4236

Amount of Each Disbursement this Period

5579.82

Full Name (Last, First, Middle Initial)

B. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : SB21B.I1155

Amount of Each Disbursement this Period

51.74

Full Name (Last, First, Middle Initial)

C. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2015

Transaction ID : SB21B.I1156

Amount of Each Disbursement this Period

187.79

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5819.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2015

Transaction ID : SB21B.I1157

Amount of Each Disbursement this Period

216.65

Full Name (Last, First, Middle Initial)

B. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.I1158

Amount of Each Disbursement this Period

95.00

Full Name (Last, First, Middle Initial)

C. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2015

Transaction ID : SB21B.I1159

Amount of Each Disbursement this Period

114.93

SUBTOTAL of Disbursements This Page (optional)..... ▶

426.58

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : SB21B.I1160

Amount of Each Disbursement this Period

356.53

Full Name (Last, First, Middle Initial)

B. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2015

Transaction ID : SB21B.I1161

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I1162

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

406.53

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2015

Transaction ID : SB21B.I1163

Amount of Each Disbursement this Period

351.98

Full Name (Last, First, Middle Initial)

B. RESPONSE AMERICA, LLC

Mailing Address 211 N. UNION ST

City ALEXANDRIA State VA Zip Code 22134

Purpose of Disbursement
ADVOCACY MAIL PRODUCTION

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.I4239

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 14 / 2015

Transaction ID : SB21B.I1165

Amount of Each Disbursement this Period

12582.64

SUBTOTAL of Disbursements This Page (optional)..... ▶

15434.62

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2015

Transaction ID : SB21B.I1166

Amount of Each Disbursement this Period

19509.33

Full Name (Last, First, Middle Initial)

B. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2015

Transaction ID : SB21B.I1167

Amount of Each Disbursement this Period

1106.88

Full Name (Last, First, Middle Initial)

C. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MARKETING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2015

Transaction ID : SB21B.I1168

Amount of Each Disbursement this Period

8322.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

28938.21

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2015

Transaction ID : SB21B.I1169

Amount of Each Disbursement this Period
2648.45

Category/Type
003

Full Name (Last, First, Middle Initial)
B. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
03 / 25 / 2015

Transaction ID : SB21B.I1170

Amount of Each Disbursement this Period
5969.50

Category/Type
003

Full Name (Last, First, Middle Initial)
C. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
CONTRIBUTION PROCESSING CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: 2015 Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB21B.I1171

Amount of Each Disbursement this Period
4800.25

Category/Type
003

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13418.20

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.I1172

Amount of Each Disbursement this Period

14305.97

Full Name (Last, First, Middle Initial)

B. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
OUTBOUND TELEPHONE MESSAGING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2015

Transaction ID : SB21B.I1173

Amount of Each Disbursement this Period

4253.11

Full Name (Last, First, Middle Initial)

C. US BANK

Mailing Address 800 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
BANK FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB21B.I4233

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

18569.08

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. US BANK

Mailing Address 800 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
BANK FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

Transaction ID : SB21B.I4234

Amount of Each Disbursement this Period

32.36

Full Name (Last, First, Middle Initial)

B. US BANK

Mailing Address 800 NICOLLET MALL

City MINNEAPOLIS State MN Zip Code 55402

Purpose of Disbursement
BANK FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2015

Transaction ID : SB21B.I4235

Amount of Each Disbursement this Period

75.43

Full Name (Last, First, Middle Initial)

C. VISUAL IMPACT DESIGN

Mailing Address 160 ROOSEVELT AVE SUITE 201

City YORK State PA Zip Code 17401

Purpose of Disbursement
DIGITAL MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.I4240

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

607.79

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. WIN RIGHT DATA, LLC

Mailing Address 2800 GLEN GARY DRIVE

City RICHMOND State VA Zip Code 23233

Purpose of Disbursement
LIST RENTAL FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 05 / 2015

Transaction ID : SB21B.I4241

Amount of Each Disbursement this Period

420.50

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

420.50

TOTAL This Period (last page this line number only)..... ▶

96263.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. JERI WESLEY

Mailing Address 6105 LYNNHAVEN

City LUBBOCK State TX Zip Code 79413

Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 13 / 2015

Transaction ID : SB28A.I1188

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. MATT CHISHOLM

Mailing Address 203 S. UNION ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; STAFF COMPENSATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1118

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NICK GIVAS

Mailing Address 203 S. UNION ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; DIGITAL CONTENT DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1120

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NICK GIVAS

Mailing Address 203 S. UNION ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; DIGITAL CONTENT DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1121

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; CAREY ACCOUNT; PAC MANAGEMENT CONSULTING
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SB29.I1131

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT CONSULTING
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SB29.I1132

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT SERVICES
Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2015
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SB29.I1133

Amount of Each Disbursement this Period

678.67

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3678.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.I1134

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT SERVICES

002
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.I1135

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB29.I1136

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : SB29.I1137

Amount of Each Disbursement this Period

1700.00

Full Name (Last, First, Middle Initial)

B. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT SERVICES

002

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2015

Transaction ID : SB29.I1138

Amount of Each Disbursement this Period

841.80

Full Name (Last, First, Middle Initial)

C. TED HARVEY

Mailing Address 3010 WYECLIFF LANE

City State Zip Code
HIGHLANDS RANCH CO 80126

Purpose of Disbursement
CAREY ACCOUNT; PAC MANAGEMENT CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2015

Transaction ID : SB29.I1139

Amount of Each Disbursement this Period

1250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3791.80

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. ALLEGIANCE LIST MARKETING

Mailing Address 202 CHURCH ST. SE SUITE 100

City LEESBURG State VA Zip Code 20175

Purpose of Disbursement
CAREY ACCOUNT; POSTAGE FOR DIRECT MAILING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1066

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMERICAN ACTION NEWS, LLC

Mailing Address 203 S. UNION ST, STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1067

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN ACTION NEWS, LLC

Mailing Address 203 S. UNION ST, STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1068

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN ACTION NEWS, LLC

Mailing Address 203 S. UNION ST, STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : SB29.I1069

Amount of Each Disbursement this Period

1310.00

Full Name (Last, First, Middle Initial)

B. AMERICAN ACTION NEWS, LLC

Mailing Address 203 S. UNION ST, STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2015

Transaction ID : SB29.I1070

Amount of Each Disbursement this Period

187.50

Full Name (Last, First, Middle Initial)

C. BIG EYE DIRECT

Mailing Address 13860 REDSKIN DRIVE

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
CAREY ACCOUNT; POSTAGE FOR MAILING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SB29.I1071

Amount of Each Disbursement this Period

5747.70

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7245.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. BIGEYE DIRECT

Mailing Address 13860 REDSKIN DR

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
CAREY ACCOUNT; POSTAGE FOR DIRECT MAILING

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2015

Transaction ID : SB29.I1072

Amount of Each Disbursement this Period

1456.73

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; REFUND OF MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2015

Transaction ID : SB29.I1000

Amount of Each Disbursement this Period

-5458.04

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; ANTI HILLARY CLINTON DIGITAL ADVOCACY

003

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2015

Transaction ID : SB29.I1074

Amount of Each Disbursement this Period

6088.58

SUBTOTAL of Disbursements This Page (optional)..... ▶

2087.27

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; ANTI HILLARY DIGITAL ADVOCACY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1075

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; ANTI HILLARY CLINTON DIGITAL ADVOCACY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1076

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1077

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 11 / 2015

Transaction ID : SB29.I1078

Amount of Each Disbursement this Period

2300.00

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : SB29.I1079

Amount of Each Disbursement this Period

2300.00

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SB29.I1080

Amount of Each Disbursement this Period

432.52

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5032.52

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; MERCHANT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1081

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1082

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1083

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2015

Transaction ID : SB29.I1084

Amount of Each Disbursement this Period

1317.75

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2015

Transaction ID : SB29.I1086

Amount of Each Disbursement this Period

32084.44

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2015

Transaction ID : SB29.I1088

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

33552.19

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2015

Transaction ID : SB29.I1090

Amount of Each Disbursement this Period

1350.00

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2015

Transaction ID : SB29.I1091

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; MERCHANT PROCESSING FEES

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SB29.I1092

Amount of Each Disbursement this Period

39773.69

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

41173.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N. SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

Transaction ID : SB29.I1093

Amount of Each Disbursement this Period

71534.93

Full Name (Last, First, Middle Initial)

B. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; ONLINE ADVERTISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SB29.I1095

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; ONLINE ADVERTISING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 09 / 2015

Transaction ID : SB29.I1096

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

77534.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; ONLINE ADVERTISING FEES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SB29.I1097

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 20 / 2015

Transaction ID : SB29.I1098

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : SB29.I1099

Amount of Each Disbursement this Period

786.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

1986.32

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
CAREY ACCOUNT; ONLINE ADVERTISING FEES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : SB29.I1100

Amount of Each Disbursement this Period

28795.00

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : SB29.I1102

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2015

Transaction ID : SB29.I1103

Amount of Each Disbursement this Period

205.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

31000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1104

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1105

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; CPAC EVENT EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1106

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2015

Transaction ID : SB29.I1107

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2015

Transaction ID : SB29.I1108

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2015

Transaction ID : SB29.I1109

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.I1110**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.I1111**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.I1112**

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 27 / 2015

Transaction ID : SB29.I1113

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 15 / 2015

Transaction ID : SB29.I1114

Amount of Each Disbursement this Period

1750.00

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S. UNION ST
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LEGAL AND COMPLIANCE CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : SB29.I1115

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. LITTLE BONANZA PRODUCTIONS

Mailing Address 33301 AGUA DULCE CANYON ROAD PMB#2

City State Zip Code
AQUA DULCE CA 91390

Purpose of Disbursement
CAREY ACCOUNT; DIGITAL ADVERTISING PRODUCTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1116

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City State Zip Code
DULLES VA 20166

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND MESSAGING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1119

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
CAREY ACCOUNT; MERCHANT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.I1127

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. PRISM STRATEGIES

Mailing Address 2511 Q ST, NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
CAREY ACCOUNT; PR SERVICES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2015

Transaction ID : SB29.I1122

Amount of Each Disbursement this Period

3004.95

Full Name (Last, First, Middle Initial)

B. PRISM STRATEGIES

Mailing Address 2511 Q ST, NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
CAREY ACCOUNT; PR SERVICES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 03 / 2015

Transaction ID : SB29.I1164

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. RAINMAKERS

Mailing Address 5211 PORT ROYAL RD

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement
CAREY ACCOUNT; FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2015

Transaction ID : SB29.I1123

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7504.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. RAINMAKERS

Mailing Address 5211 PORT ROYAL RD

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement
CAREY ACCOUNT; FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SB29.I1124

Amount of Each Disbursement this Period

38562.81

Full Name (Last, First, Middle Initial)

B. RAINMAKERS

Mailing Address 5211 PORT ROYAL RD

City SPRINGFIELD State VA Zip Code 22151

Purpose of Disbursement
CAREY ACCOUNT; FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2015

Transaction ID : SB29.I1125

Amount of Each Disbursement this Period

8838.91

Full Name (Last, First, Middle Initial)

C. RED PHONE CONSULTING

Mailing Address P.O. BOX 862176

City MARIETTA State GA Zip Code 30062

Purpose of Disbursement
CAREY ACCOUNT; DIGITAL OUTREACH CONSULTING

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 12 / 2015

Transaction ID : SB29.I1126

Amount of Each Disbursement this Period

1453.10

SUBTOTAL of Disbursements This Page (optional)..... ▶

48854.82

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. SCM ENTERPRISES

Mailing Address 203 S. UNION ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY ACCOUNT; LIST RENTAL FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SB29.I1128

Amount of Each Disbursement this Period

7086.13

Full Name (Last, First, Middle Initial)

B. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2015

Transaction ID : SB29.I1129

Amount of Each Disbursement this Period

2540.10

Full Name (Last, First, Middle Initial)

C. STRATEGIC FUNDRAISING, INC.

Mailing Address 7800 3RD STREET N
SUITE 900

City SAINT PAUL State MN Zip Code 55128

Purpose of Disbursement
CAREY ACCOUNT; OUTBOUND TELEPHONE MESSAGING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : SB29.I1130

Amount of Each Disbursement this Period

15625.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25251.44

461097.39

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC	FEC IDENTIFICATION NUMBER ▼ C C00544767
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2015	
Mailing Address 117 N. SAINT ASAPH ST		Amount 10000.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.998
Purpose of Expenditure ESTIMATE OF DIGITAL ADVERTISING PRODUCTION AND BASE DEPLOYMENT COSTS		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 13 / 2015
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 41650.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee CAMPAIGN SOLUTIONS		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 28 / 2015	
Mailing Address 117 N. SAINT ASAPH ST		Amount 10350.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.1003
Purpose of Expenditure NATIONAL LIST RENTAL FEES		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 28 / 2015
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 41650.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	20350.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC	FEC IDENTIFICATION NUMBER ▼ C C00544767
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 18 / 2015
Mailing Address 117 N. SAINT ASAPH ST	Amount 2300.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24.1005 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 19 / 2015
Purpose of Expenditure LIST RENTAL FEES Category/Type 003	Name of Federal Candidate HILLARY CLINTON <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 41650.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 29 / 2015
Mailing Address 117 N. SAINT ASAPH ST	Amount 9000.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SE24.1006 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 20 / 2015
Purpose of Expenditure LIST RENTAL FEES Category/Type 003	Name of Federal Candidate HILLARY CLINTON <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 41650.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11300.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DAN BACKER [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
11 / 05 / 2015

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC	FEC IDENTIFICATION NUMBER ▼ C C00544767
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee CD, INC.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2015
Mailing Address P.O. BOX 1877	Amount 10000.00
City ALEXANDRIA State VA Zip Code 22313	Transaction ID : SE24.997 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2015
Purpose of Expenditure ONLINE ADVERTISING BUY Category/Type 004	Name of Federal Candidate HILLARY CLINTON <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 41650.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee THE STRATEGY GROUP FOR MEDIA	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2015
Mailing Address 7669 STAGGERS LOOPS	Amount 5000.00
City DELAWARE State OH Zip Code 43015	Transaction ID : SE24.1140 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015
Purpose of Expenditure ADVERTISING PRODUCTION Category/Type 004	Name of Federal Candidate HILLARY CLINTON <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 5000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	46650.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer
Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2015